

INTERNATIONAL STUDENT MEDICAL AND TRAVEL INSURANCES

VARIATION TO REQUIREMENTS WAIVER FORM



Victoria University of Wellington has agreed to comply with the Code of Practice for the Pastoral Care of International Students (The Code) written by the NZ Ministry of Education. The Code sets out the minimum standards of advice and care that educational institutions must provide international students. The Code also states that all international students must have appropriate health and travel insurance throughout their course of study. International students must be appropriately insured for travel, health and medical, personal effects, loss of deposit and personal liability. For further details refer to the insurance section of the Victoria International website www.victoria.ac.nz/international

All international students at Victoria University of Wellington are automatically insured under Studentsafe Inbound University medical and travel insurance. For more information about this policy visit www.insurancesafenz.com/studentsafe/student-safe-inbound-university

Students who prefer to use an alternative insurance policy must submit this form to the Insurance Advisor at Victoria International.

For help to complete this form, contact the Insurance Advisor at Victoria International: email vi-insurance@vuw.ac.nz, phone +64-4-463 9458.

Please select below your reason for a waiver from StudentSafe-University insurance

I have an alternative medical and travel insurance policy:

- Unicare NZ Student Plan Southern Cross Student Individual Orbit Protect Prime

Other (please specify):

This policy must be approved by Victoria University of Wellington. You must submit the full policy wording (in English) for assessment at least three weeks before your enrolment date. If the policy is not approved then an alternative approved policy must be purchased.

Policy Start Date:

DD/MM/YY

Policy End Date:

DD/MM/YY

I understand that I must provide the Insurance Advisor at Victoria International with a copy of my renewed above-named insurance policy before the policy end date. If I cancel or amend this policy, I must immediately inform the Insurance Advisor at Victoria International.

I acknowledge that it is my responsibility to ensure the insurance policy is current at all times while I am enrolled at Victoria University of Wellington.

I understand that if I do not provide an updated copy of my policy before the policy end date I will be automatically transferred onto and charged for the Studentsafe-University policy.

I understand that at the policy end date I can transfer to Studentsafe-University Insurance. However, pre-existing medical conditions may not be covered under the new policy.

I am completing my qualification on (date):

DD/MM/YY

I understand that after the policy end date I must leave New Zealand, or change my visa status so I am no longer on a student visa.

I understand that if I choose to continue my studies at Victoria University of Wellington after the above date, I must inform the Insurance Advisor at Victoria International in writing so that my insurance can be extended. I understand that I will be required to pay the insurance premium associated with the policy extension.

I understand that if I continue my studies after the above date and fail to inform the Insurance Advisor at Victoria International, I will be liable for the full cost of the Studentsafe-University policy for the duration for my extension, and that these costs may be charged retroactively.

I have a PhD Suspension or am studying offshore (eg VictoriaAbroad, research overseas)

Departure date from New Zealand:

DD/MM/YY

Expected return date to New Zealand:

DD/MM/YY

I have been made aware and understand that if there are any breaks in my insurance coverage I risk any medical condition that occurs during the break being considered a pre-existing condition, and therefore not be covered by future insurance.

I am a distance student and will not be travelling to New Zealand during my studies

Other (please explain)

Continue on a separate page, if required

I declare that due to the above circumstance I do not need the Studentsafe-University medical and travel insurance policy. I will notify the Insurance Advisor in advance in writing if my circumstances change.

I acknowledge and understand that Victoria University of Wellington has strongly advised me that I purchase an insurance policy that includes all the insurance components recommended in the **Code of Practice for the Pastoral Care of International Students Guidelines**.

I acknowledge that if I choose not follow the above advice, I absolve Victoria University of Wellington from any liability in respect of its advice or its obligations under The Code for any matters relating to my medical and travel insurance as an international student in New Zealand.

I will inform Victoria University in advance in writing of any changes to my enrolment status that may impact on my insurance length of coverage.

Student Name

Student ID

Date

Signature

DD/MM/YY

OFFICIAL USE ONLY:

Approved by VI Insurance Advisor:

Signature

Name

Date