**UniSA Travel Insurance**

**Student Assessment Form**

This form is used to assess a student’s eligibility to access UniSA travel insurance and, if necessary, purchase an extension to the policy. All fields are required to be completed.

Once the form is completed, save the document and email it to [insurance@unisa.edu.au](mailto:insurance@unisa.edu.au).

You will receive the advice on your Travel Insurance within 5 working days.

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| --- | --- |
| **Student ID number:** |  |
| **Full name:** |  |
| **Date of birth:** |  |
| **Date your travel commences:** |  |
| **Date you arrive home:** |  |
| **Details of any pre-existing medical condition(s):** |  |
| **Purpose of your travel:**  *(e.g. student exchange, placement,  study tour etc)* |  |
| **Dates of travel directly related to your study:** *(e.g. dates of your exchange, placement, study tour etc)* |  |
| **Are you receiving academic credit for the study related travel?** |  |
| **List of countries to be visited:** |  |
| **Will you be undertaking any paid work while travelling?:** |  |

**Please note:**

* Failure to disclose pre-existing medical conditions prior to commencing your travel may result in cancellation of your cover.
* Usual medications required for existing medical conditions are not covered by the policy. You are required to take these with you.
* Depending on the nature/severity of your declared medical condition you may be asked to seek medical clearance from your doctor to travel in order to be covered.

**Online resources:**

* [Student Travel Insurance Policy summary](http://w3.unisa.edu.au/fin/commercial_support/insurance/Travel_Insurance/STUDENT%20-%20Travel%20Insurance%20Summary%204.11.15.pdf)
* [Travel Insurance FAQs](http://w3.unisa.edu.au/fin/Commercial_Support/FAQs/faq_travel_insurance.asp)

**Contact UniSA Insurance Office:**

[insurance@unisa.edu.au](mailto:insurance@unisa.edu.au)

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