
Health Insurance Waiver Request 2020-2021

Pacific Northwest College of Art requires all students taking 6 or more credits to carry medical insurance. Unless specifically waived, you will be automatically covered under a plan designed especially for students. All students are billed automatically upon registration.

Medical insurance is also mandatory for students in off-campus or study abroad programs. If you are covered by other medical insurance and wish to waive the coverage offered by the College, you must complete this form and return it to the Student Accounts office.

Part I: Student Information

| | | | |
|---------------------------|-----------------------------|--------------------------------|-----------------------|
| Student Last Name | First Name | Student Social Security Number | Student Date of Birth |
| Address | City | State Zip | Daytime Phone Number |
| Name of Insurance Company | Plan ID/Policy/Group Number | | |
| Policy Holder Name | Address | City | State Zip |

Part II: Criteria and Agreement

Waiver request due August 24, 2020.

Waivers will not be accepted after the due date. If you have questions regarding PNCA Health Insurance Plan coverage, please contact Student Life at 503.821.8925.

Complete and return this form to:

PNCA Student Accounts Office
511 NW Broadway, Portland OR 97209
studentaccounts@pnca.edu

Attestation:

I have read and understand the medical insurance policy offered by PNCA. I hereby waive all rights to compensation from the designated insurance company and/or PNCA for medical expenses incurred by me while this waiver is in force and do thereby accept all responsibility for my medical expenses.

I certify that the above information is true and agree to notify the College of any change in said information.

| | | |
|--------------------------------------|--------------------|------|
| Student or Policy Holder's Signature | Student Billing ID | Date |
| Parent/Guardian Signature | Phone | Date |

| | |
|--------------------|-------------|
| Received by: _____ | Date: _____ |
| Notes: _____ | _____ |
| _____ | _____ |