

Dear Insurance Provider:

In order for students and scholars to enter the United States on a J Visa, they must have a specific type of insurance coverage required by the U.S. federal government. The specific coverage is listed below. If students do not have insurance that covers the specifications below, they must purchase insurance upon arrival in the United States. Please check whether or not your policy provides each of the specific types of coverage listed below for your client, _____.

Then, please sign and stamp this form.

Thank you,



Natalie Best
 Assistant Director
 International Student and Scholar Services

To be completed by the J Visa holder:

Client name: _____

Policy # _____

Name of insurance provider: _____

To be completed by the insurance agent: Please check "yes" if your client's policy includes the coverage described and "no" if it does not.

Yes	No	
		Medical benefits of at least \$50,000 per person per accident or illness
		Repatriation of remains in the amount of \$7,500
		Expenses associated with medical evacuation in the amount of \$10,000
		The deductible is LESS than \$500 per accident or illness.

I attest that the above information is true.

 Insurance agent's name, printed

 Insurance agent's signature

 Date

Please stamp this paper with company stamp.