



Submit form to Compliance Office prior to each academic year for authorization prior the student-athlete beginning classes. The form will be verified and forwarded to the Business Office to complete the process.

Student-Athlete Name: _____

Student-Athlete ID number: _____

Requesting Team: _____

Bylaw 16.4 permits an institution to provide medical expenses including medical insurance. Insurance cost may not be provided through scholarship dollars. Indiana University-Purdue University Fort Wayne requires international students to have health insurance and makes health insurance available to all international students and fees are assessed directly to international student accounts. International students may have the mandatory fee waived by completing the [Medical Insurance Plan Waiver Form](#). Students who may qualify for a waiver will fit one of three categories, and student-athletes typically meet Category #1 - Government-sponsored students whose home government purchases insurance for students and does not just supply funds to purchase an insurance plan of their choice. (Countries that may offer access to these benefits include but are not limited to: Germany, Sweden and Norway. Students should check prior to enrollment if their health insurance meets the waiver criteria.)

More information on waiving the health insurance fees can be found [here](#).

Purdue Fort Wayne may use NCAA grant funds (or operational funds) to assist international students in defraying the cost of the mandatory institutional insurance fee. To ensure funding is available on an equitable basis for international student-athletes, any student-athlete requesting funds must complete the Waiver Form first.

Please verify the following:

Student-athlete has submitted the Medical Insurance Plan Waiver for to the Office of International Education?
Yes No

Confirmation student-athlete does not qualify for waiver of health insurance fees? Yes No

Does the student-athlete receive a scholarship that includes an award for "Other Expenses Related to Attendance" (or Cost of Attendance)?
Yes No

Student-Athlete Signature: _____

Date: _____

Head Coach Signature: _____

Date: _____

Compliance Office Signature: _____

Date: _____

Business Office Signature: _____

Date: _____

Business Office will process payment of the insurance fees with the Office of International Education after approval.