

International students in Post Secondary under the provincial plan (OHIP)- online opt-out application



- *Please read all questions carefully. All mandatory fields must be completed before form will be accepted.
- *All instructions and steps must be followed, in order for your application to be submitted for review successfully.

Section 1.

Please make sure all the information is accurate and complete. Even the fields that are not marked as required. For program registration dates, you must include the **entire duration of your program**, not only the semester you are currently registered.

GEORGE BROWN STUDENT ASSOCIATION
STUDENT INSURANCE OPT OUT FORM

This form will enable you to apply for a Student Insurance Plan Reimbursement for the school year by filling in the information required below. This form must be returned to the George Brown College Student Association Office.

STUDENT INFORMATION - PLEASE PRINT CLEARLY

FIRST NAME *	LAST NAME *	INITIAL
STUDENT ID *	DATE OF BIRTH (DD/MM/YY) (/ /)	
GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	DATE (DD/MM/YY) (* / * / *)	
PHONE NUMBER *	ADDRESS	
CITY	POSTAL CODE	
PROGRAM REGISTRATION FROM (DD/MM/YY) (* / * / *)	IQ (DD/MM/YY) (* / * / *)	

Section 2.

Please note that International Post-secondary plan has 2 types of coverage: OHIP Alternative and Extended health and Dental. Therefore, there are two opt-out options for international students:

Option 1. OHIP Alternative Only

Option 2. OHIP Alternative + Health & Dental Benefits

*Select the option applicable to you, one **or** the other. Please do not select both options.

OPT OUT

I wish to opt out of:
(indicate by checkmark)

OHIP Alternative Only (international student)
I am covered under OHIP (the Ontario Provincial Health Insurance Plan).

OHIP Alternative + Health & Dental Benefits (international student)
I am covered under OHIP (the Ontario Provincial Health Insurance Plan), and I have my own Health & Dental insurance.

Health & Dental Benefits (domestic student)
I have my own Health & Dental insurance.

Section 3.

-If you selected option 1 (OHIP Alternative Only), you **must** attach proof of provincial coverage (OHIP).
-Or if you selected option 2 (OHIP Alternative + Health & Dental Benefits), you **must** attach proof of both coverages.

*If you do not have proof of provincial coverage (OHIP), you are not eligible to submit this application. Please contact the health benefits team at healthbenefits@sagbc.ca to verify.

This notice serves to confirm that I am opting out of the Student Insurance Plan offered to me through The George Brown College Student Association as I have health benefits under the attached plan:

Please attach copy of OHIP* Card and/or proof of Health & Dental Insurance.

[Click to Attach File...](#)

* = For international post-secondary students, OHIP coverage must be effective on or before Sep 1st (for September start students), Jan 1st (for January start students), and May 1st (for May start students).

* = For International ESL program students, your OHIP coverage must be effective on or before the 1st of the month which your program starts.

Section 4. First Signature

You can simply type in your name in the required field.

By my signature I am confirming that I have not accessed the Student Insurance Plan offered to me by The George Brown College Student Association this current year for which I am opting out of. I understand I will not be eligible to re-enroll unless my existing coverage terminates, in which case, I have 30 days from the date of termination to opt into the student insurance plan.

SIGNATURE OF STUDENT

STUDENT ASSOCIATION AUTHORIZATION

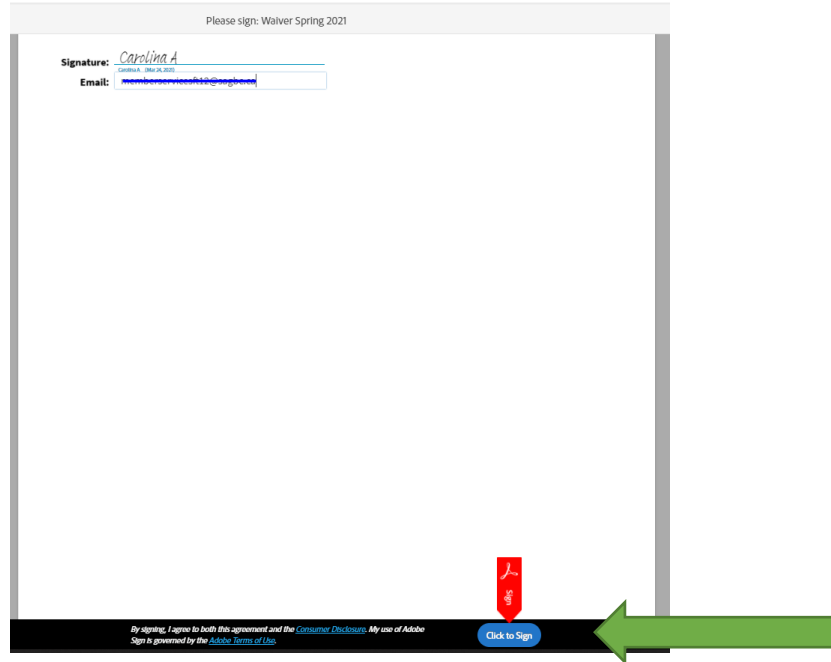
*

Section 5. E-signature

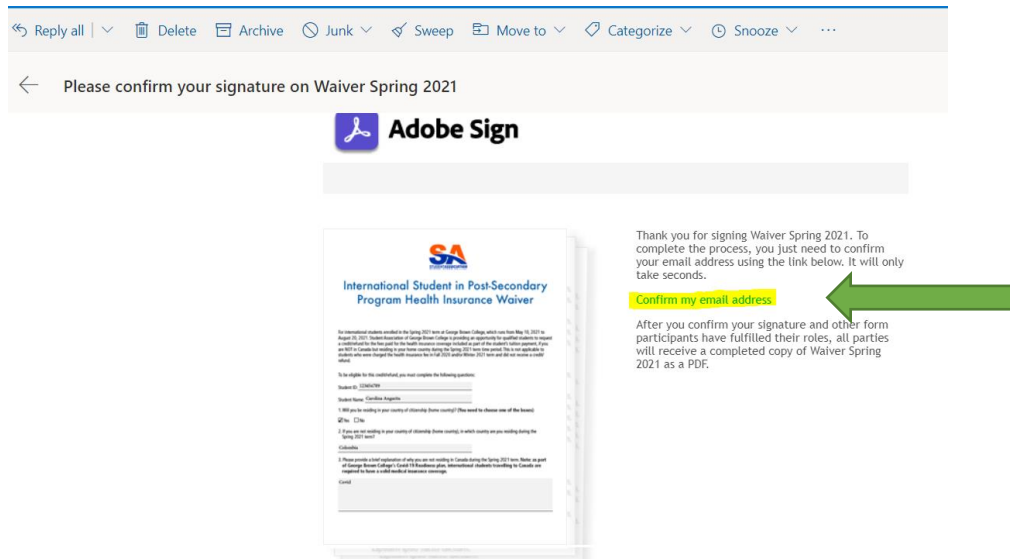
- Sign and type in the email you would like to receive your authentication steps.

The screenshot shows a two-step process for e-signature. The top part is a form with two fields: 'Signature:' with a yellow highlight and the text 'Click here to sign', and 'Email:' with a yellow highlight and the text 'Enter your email address'. A green arrow points to the 'Signature:' field. The bottom part is a signature capture window with a 'Next' button, 'Signature:' and 'Email:' labels, a red 'Sign' button, and a large text area labeled 'Type your signature here'. At the bottom of this window are 'Close' and 'Apply' buttons. A green arrow points to the 'Apply' button.

- Click on “Click to Sign” at the bottom of the page



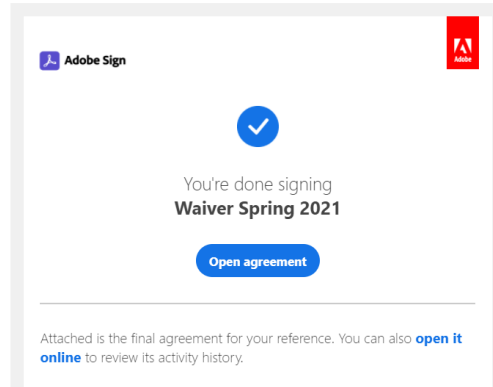
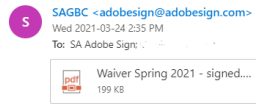
- You must confirm the submission from the email you receive from Adobe Sign and click on “Confirm my email address” to authenticate application.



- Once you click on the link, you will see the confirmation below and your application submission and **CONFIRMATION** will be sent to your email.



- Please keep this email confirmation of your application for your records. **If you received the signed form, it means it was successfully submitted to us, and you will be contacted if we have further questions.**



Thank you!

