

## STUDY ABROAD APPROVAL FORM – PART II

### 1. HEALTH INSURANCE

Princeton University requires that all students carry health insurance. As a study abroad participant, you are still a registered student at the University and are therefore required to maintain health coverage. Please review the following options and indicate which of the following statements is true in your case:

- I have comparable family/private health coverage which meets or exceeds the Princeton Student Health Plan (see below).
- I am already enrolled in the Princeton Student Health Plan and wish to continue enrollment.
- I am currently covered by family/private health coverage, but now wish to enroll in the Princeton University Student Health Plan.

To aid you in the process of determining if your family/private insurance is comparable to the Princeton University Student Health Plan, we have listed below the criteria for comparison.

#### Your family/private coverage must meet the following criteria:

- My HMO or PPO plan covers the insured while he or she is in Princeton or traveling in the United States *or abroad*.
- My plan covers treatment for emergency care, medical and surgical treatment, diagnostic procedures, laboratory tests, specialty consultations, and hospitalization (including inpatient hospitalization for mental health/psychiatric care and chemical dependency).
- My plan has a maximum benefit per student of at least \$100,000 annually or \$400,000 lifetime.
- My plan covers injuries resulting from the practice or play of athletics.
- My insurance carrier is domiciled in the United States.

If you currently have health insurance through a private insurer, please review the above information with your family and make sure that your coverage meets all of these basic criteria.

### 2. DISCIPLINARY RECORD

Have you been subject to any disciplinary action beyond a Dean's Warning while at Princeton?  yes  no

*N.B. A disciplinary record does not preclude approval to study abroad, but we will review disciplinary records with the Office of the Dean of Undergraduate Students to determine if the record warrants withholding approval.*

### 3. AUTHORIZATION TO RELEASE ADDRESS WHILE ABROAD

*(check one)*  I give  I do not give my permission for the Dean of the College Office to release my mailing and e-mail address abroad to Princeton students on campus and on the study abroad program.

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Signature

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Date

### 4. ESSAY

Please submit an essay of at least 500 words explaining your reasons for wanting to study abroad and how it will benefit your undergraduate program in general and your departmental studies in particular.

**4. EMERGENCY CONTACT INFORMATION**

(A) CONTACT NAME \_\_\_\_\_  
RELATIONSHIP \_\_\_\_\_  
HOME PHONE \_\_\_\_\_  
WORK PHONE \_\_\_\_\_  
CELL PHONE \_\_\_\_\_  
EMAIL \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(B) CONTACT NAME \_\_\_\_\_  
RELATIONSHIP \_\_\_\_\_  
HOME PHONE \_\_\_\_\_  
WORK PHONE \_\_\_\_\_  
CELL PHONE \_\_\_\_\_  
EMAIL \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
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