



Enrollment Services
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 Admissions@umpqua.edu

Verification of Health Insurance

Umpqua Community College (UCC) requires you to purchase student accident and health insurance through the school unless you can verify the following:

Section 1 – Insurance Information

- You are currently insured under a similar insurance policy that is effective in the United States.
- Your insurance coverage is now in effect and will continue to be in effect throughout your course of study at UCC.

If you have accident and health insurance as indicated above, please provide the following information:

Name of insurance company: _____

Address of insurance company: _____

Policy Number _____

Effective date of coverage: _____

Expiration date of coverage: _____

Submit coverage summary outline in English

Option 1

I hereby certify that the answers and information provided above are true, complete and correct to the best of my knowledge.

Student Name (please print)
Student Signature
Date

Option 2

I currently do not have health and accident insurance but will purchase the insurance through Umpqua Community College.

Student Name (please print)
Student Signature
Date

Choose only one Option and Print, Sign and Date