

INTERNATIONAL SUMMER INSURANCE WAIVER

GRADUATES ONLY

Date: _____

Students graduating Spring 2023 have the option to waive the summer coverage of the MSU Student Health Insurance Plan.

Instructions:

Submit this form via email to vinson@msutexas.edu

Deadline: April 1, 2023

Late waiver forms will not be accepted.	
Part I: Completed By Student	
Student Name:	Student ID#:
MSU Email:	DOB (dd/mm/yyyy):
By signing this form, I attest that I graduate Spring 2 the MSU Student Health Insurance Plan for the Sum 2023). I understand that my insurance coverage will	2023 semester. I do not wish to be enrolled in namer 2023 semester (May 31, 2023 to July 31, I end (May 31, 2023).
Signature:	Date:
Part II: Completed By Student's Academic Departme	<u>ent</u>
Pending successful completion of all currently register all degree requirements and officially graduate in Ma	•
Academic Department:	
Name of Representative:	
Title of Representative:	
Signature:	Date: