



Generali Insurance Malaysia Berhad

Reg No: 197501002042 (23820-W)

Generali Customer Service Centre

Level 1, Menara Generali,

27 Jalan Sultan Ismail, 50250 Kuala Lumpur, Malaysia.

Tel: 1 300 13 2121 or +603 3007 2121 Email: customer.service.gi@generali.com.my

www.generali.com.my

Member of PIDM

The benefit (s) payable under eligible product is protected by PIDM up to limits. Please refer to PIDM's TIPS Brochure or contact Generali Insurance Malaysia Berhad or PIDM (visit www.pidm.gov.my).

Generali Insurance Malaysia Berhad is licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia.

STUDENT PROTECTION PA POLICY

IMPORTANT NOTICES

1. This is Your **Student Protection PA** Policy. This Policy is issued by Us in consideration of the premium paid or to be paid to Us as specified in the Policy Schedule and contains the terms and conditions of the contract of insurance as agreed between You and Us. Please read this Policy carefully to ensure that You understand the terms and conditions and that the insurance You require is being provided. If You have any questions after reading this Policy, please contact Us or Your insurance advisor. If there are any changes in Your circumstances which may affect the insurance provided, please notify Us immediately. If You do not, You may not receive any or some of the Benefits set out in this Policy.
2. Please keep this Policy in a safe place. If this Policy is renewed or if there are any amendments to the terms and conditions, We will send You a new Schedule or an Endorsement only. Do contact us if You would like another copy of this Policy or a copy of this Policy in Bahasa Malaysia; We will be happy to provide one.
3. In deciding to issue this Policy, We have relied on the answers and information given when application was made for this Policy. We have also relied on other disclosures, if any, made to Us when the application was made up to the time this Policy was issued. Those answers, information and other disclosures, if any, therefore also form part of the contract of insurance between You and Us.
4. If You had applied for this Policy wholly for purposes unrelated to Your trade, business or profession, You had a duty to take reasonable care not to make a misrepresentation in answering the questions or providing the information requested when You applied for this Policy. You should have answered the questions and provided the information fully and accurately. Failure to have taken reasonable care in answering the questions or providing the information requested may result in avoidance of this Policy, refusal or reduction of any claim made by You under this Policy, change of terms or termination of this Policy in accordance with the relevant law. You were also required to disclose any other matter that You knew to be relevant to Our decision in accepting the risks and determining the rates and terms to be applied.
5. If at any time the law requires Us to collect from You any tax in connection with the insurance provided or the premium You have paid, please note that We will be entitled to recover from You such tax if it has not yet been paid.
6. If, for any reason, You are not happy with the service You have received from Us, You may:
 - 6.1 write to Our Customer Service Department at Level 1, Menara Generali, 27 Jalan Sultan Ismail, 50250 Kuala Lumpur, Malaysia; or
 - 6.2 e-mail Us at customer.service.gi@generali.com.my.
7. If You are still not satisfied with the way any issue has been handled by Us, You may:
 - 7.1 refer matters concerning claims to:

Financial Markets Ombudsman Service
(formerly known as Ombudsman for Financial Services)
Company No: 200401025885
Level 14, Main Block, Menara Takaful Malaysia,
No. 4, Jalan Sultan Sulaiman,
50000 Kuala Lumpur.
Tel: +603 2272 2811
Website: www.fmos.org.my
 - or
 - 7.2 submit Your complaints or feedback to:

BNMLINK
4th Floor, Podium Bangunan AICB, No. 10, Jalan Dato' Onn, 50480 Kuala Lumpur.
Tel: 1-300-88-5465
(Overseas: +603 2174 1717)
BNMLINK Webpage : bnm.gov.my/BNMLINK

8. In respect of any communication between You and Us including, without limitation, the giving of any notice or demand under this Policy:
- 8.1 You are to –
- (a) write to Our Customer Service Department at Level 1, Menara Generali, 27 Jalan Sultan Ismail, 50250 Kuala Lumpur, Malaysia; or
 - (b) e-mail Us at customer.service.gi@general.com.my; and
 - (c) call Us at 1 300 13 2121 or +603 3007 2121
- 8.2 We may –
- (a) write to You at the address given to Us in Your proposal for this Policy or at Your address last notified to Us in writing; or
 - (b) email You at the email address given to Us in Your proposal for this Policy or at Your email address last notified to Us in writing; or
 - (c) communicate with You by mobile phone or any form of electronic messaging We may consider fit at a contact number or electronic address which You have given to Us;

If sent by post, the notice or demand, if correctly addressed, will be deemed to have been received on the third day after posting. If sent by email, mobile phone or any form of electronic messaging, the notice or demand will be deemed to have been received on the day it was sent.

Statement Pursuant to Schedule 9 of the Financial Services Act 2013

This Policy is issued in consideration of the payment of Premium as specified in the Policy Schedule and pursuant to the answers given in Your Proposal Form (or when You applied for this insurance) and any other disclosures made by You between the time of submission of Your Proposal Form (or when You applied for this insurance) and the time this contract is entered into. The answers and any other disclosures given by You shall form part of this contract of insurance between You and Us, However, in the event of any pre-contractual misrepresentation made in relation to Your answers or in any disclosures given by You, only the remedies in Schedule 9 of the Financial Services Act 2013 will apply.

This Policy reflects the terms and conditions of the contract of insurance as agreed between You and Us for the insurance hereinafter contained and has paid or agreed to pay the Premium in respect of such insurance.

NOW THIS POLICY WITNESSETH that if the Insured Person during the Period of Insurance shall due to an Accident sustain any Accidental Bodily Injury as hereinafter defined being the sole and direct cause of the Insured Person's death or disablement or necessitate medical and/or surgical treatment as defined hereinafter, We will subject to the terms exceptions and conditions herein or endorsed hereon pay to the Insured Person, the Insured Person's legal personal representative, or the Policyholder, whichever applicable, in accordance with Schedule 8 and Schedule 10 of the Financial Services Act 2013 and the provisions of this Policy the compensation as specified in the selected plan of the Table of Benefits.

DEFINITIONS

1. **"Accident"** or **"Accidental"** shall mean a sudden, unintentional, unexpected, unusual, or fortuitous specific event that occurs at an identifiable time and place during the Period of Insurance.
2. **"Activities of Daily Living"** shall mean the ability to carry out any of the following activities:
 - (a) Transfer: Getting in and out of a chair without requiring physical assistance.
 - (b) Mobility: The ability to move from room to room without requiring any physical assistance.
 - (c) Continence: The ability to voluntarily control bowel and bladder functions such as to maintain personal hygiene.
 - (d) Dressing: Putting on and taking off all necessary items of clothing without requiring assistance of another person.
 - (e) Bathing/Washing: The ability to wash in the bath or shower (including getting in or out of the bath or shower) or wash by any other means.
 - (f) Eating: All tasks of getting food into the body once it has been prepared.
3. **"Bodily injury"** shall mean injury suffered by the Insured Person caused solely and directly by Accidental means and shall exclude bodily injury caused by sickness, disease or medical disorder and/or disease, sickness or illness caused by bodily injury and/or any cause gradually operating upon the Insured Person.
4. **"Endorsement"** means a written alteration to the terms, conditions and limitations of this Policy.
5. **"Guardian"** shall mean an individual who has legal guardianship over the Insured Person before he/she reaches the age of nineteen (19) years.
6. **"Hospital"** shall mean only an establishment duly constituted and registered as a hospital for the care and treatment of sick and injured persons as paying bed-patients and which:
 - (a) has facilities for diagnosis and major surgery;
 - (b) provides twenty-four (24) hours a day nursing services by registered and graduate nurses;
 - (c) is under the supervision of a Medical Practitioner; and

- (d) is not primarily a clinic; a place for alcoholics or drug addicts; a nursing, rest or convalescent home or a home for the aged or similar establishment.
7. **"Insured Person"** shall mean the person named in the Schedule who are registered as a full-time student. A person eligible for this insurance is from three (3) years up to the age of twenty-one (21) years at the time of application.
8. **"Medical Expenses"** means the cost of medical surgical or other remedial attention, treatment or appliances given or prescribed by a Medical Practitioner and all hospital nursing and ambulance charges which is Medically Necessary.
9. **"Medically Necessary"** means a medical service which is:-
(a) consistent with the diagnosis and customary medical treatment for a covered disability, and
(b) in accordance with standards of good medical practice, consistent with current standard of professional medical care, and of proven medical benefits, and
(c) not for the convenience of You or the Medical Practitioner, and unable to be reasonably rendered out of Hospital (if admitted as an inpatient), and
(d) not of an experimental, investigational or research nature, preventive or screening nature,
(e) for which the charges are fair and reasonable and customary for the disability.
10. **"Medical Practitioner"** shall mean a registered medical practitioner qualified and licensed to practice western medicine and who, in rendering such treatment is practising within the scope of his licensing and training in the geographical area of practice.
11. **"Parents"** shall mean legal parents (whether natural/biological, step or adopted) of the Insured Person.
12. **"Period of Insurance"** shall mean the period stated in the Schedule or of any subsequent period in respect of which the Insured Person shall have paid and We shall have accepted the Premium required for the renewal of this Policy or any shorter period that may occur as result of a cancellation of this Policy.
13. **"Permanent Disablement"** means permanent disablement of a member of the body, the details of which are stated in the Table of Compensation and which disability lasts more than twelve (12) months following which there is no hope of improvement.
14. **"Premium"** means any amount We require You to pay under the Policy plus any additional taxes or charges imposed by the government in respect of the execution and delivery of this Policy.
15. **"Policyholder"** shall mean the School as described in the Schedule to whom this Policy has been issued in respect of cover for the Insured Person(s).
16. **"Policy"** shall mean this legal contract or endorsements between Policyholder and Us, where We agree to give the Policyholder the benefits as stated in the Policy/Endorsement in consideration of the premiums paid by the Policyholder to Us and subject always to the terms and conditions of this Policy.
17. **"Public Common Carrier"** shall mean any land, water or air conveyance operated under a license for the transportation of passengers for hire. Travelling in a public transport means as a fare-paying passenger in any public transport.
18. **"Reasonable and Customary Charges"** shall mean any medical fee or expense which is charged for treatment, supplies or medical services Medically Necessary to treat an Insured Person's condition under the care, supervision or order of a Medical Practitioner; does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is incurred; and does not include charges that would not have been made if no insurance existed.
19. **"Registered Dental Practitioner"** shall mean a person who is duly licensed or registered to practice dentistry in the geographical area in which a service is provided.
20. **"Schedule"** shall mean the document which provides details of the Policyholder and any terms and conditions that are specific to Your contract.
21. **"School"** shall mean any licensed and registered government or private education institution.
22. **"School Premises"** shall mean the School building and the land within the School compound.
23. **"We/Us/Our"** shall mean Generali Insurance Malaysia Berhad.
24. **"You/Your"** shall mean Persons named as the Policyholder in the Schedule.

INSURING AMOUNT AND BENEFITS

1. **Accidental Death**
We will pay the amount specified in the Table of Benefits, if the Insured Person sustains Accidental Bodily Injury resulting in his/her death within twelve (12) months from of the date of Accident.
2. **Accidental Permanent Disablement**
We will pay the amount specified in the Table of Benefits according to the percentage of Table of Compensation, if the Insured Person sustains Accidental Bodily Injury resulting in his/her Permanent Disablement within twelve (12) months from of the date of Accident.

3. **Accidental Death on Public Common Carrier**
We shall pay the amount specified in the Table of Benefits in addition to the Accidental Death Benefit, if the Insured Person suffers Bodily Injury due to an Accident whilst travelling on a Public Common Carrier directly to and from the Insured Person's home and School to attend School lessons and/or official School activities.
4. **Accidental Death in School Premise**
We shall pay the amount specified in the Table of Benefits in addition to Accidental Death Benefit, if the Insured Person sustains Bodily Injury due to an Accident on the School Premises resulting in his/her death within twelve (12) months from the date of Accident.
5. **Compassionate Death Benefit**
We will pay the amount specified in the Table of Benefits in the event of the Insured Person's death due to an Accident.
6. **Bereavement Benefit – Death Due to Dengue**
We will pay the amount specified in the Table of Benefits to the Insured Person's Parent or Guardian in the event of the Insured Person's death due to dengue fever.
7. **Kidnapping Extension**
We will pay, the amount specified in the Table of Benefits in addition to the Accidental Death benefit or Permanent Disablement benefit, if the Insured Person becomes a victim of kidnapping resulting in his/her death or Permanent Disablement within one (1) year from the date of the kidnap.
8. **Education Allowance**
We will pay, the amount specified in the Table of Benefits, if one of the Insured Person's Parent or Guardian suffers either death or Total Paralysis (from neck downwards) or injury resulting in being permanently bedridden due to an Accident and Parent or Guardian unable to perform three (3) or more of the Activities of Daily Living which the Parent or Guardian could normally carry out by him/herself in his/her daily life had such disablement not occurred.
9. **Allowance for School / Tuition Fees**
We will pay, the amount specified in the Table of Benefits, if the Insured Person sustains Bodily Injury due to an Accident and is unable to attend School for two (2) weeks consecutively.
10. **Accidental Medical Expenses**
We will reimburse the Reasonable and Customary Charges incurred for Medically Necessary Medical Expenses incurred up to the amount specified in the Table of Benefits as a result of any one (1) Accident.
11. **Accidental Dental Benefit**
We shall reimburse up to the amount specified in the Table of Benefits for actual charges for replacement of or repairs to sound natural teeth damaged due to an Accident, if the Insured Person shall necessarily incur expenses for dental treatment provided by a Registered Dental Practitioner at dental clinic or Hospital and such treatment must be received immediately within twenty-four (24) hours following the Accident date, and follow-up dental treatments within fourteen (14) days thereafter.

We will not reimburse the following services, products or conditions under this benefit:
 - a) Dental appliances;
 - b) Treatment by someone other than a Registered Dental Practitioner;
 - c) Charges for dentures when such charges are included for replacement of congenitally missing teeth or teeth all of which were lost before the Insured Person was covered hereunder;
 - d) Charges for routine dental check-up.
12. **Hospital Cash Allowance**
We shall pay a daily benefit for the amount specified in the Table of Benefits, in the event the Insured Person shall require confinement for treatment or surgery due to an Accident, in a Hospital in Malaysia for a minimum of six (6) consecutive hours up to a maximum of sixty (60) days for treatment or surgery due to an Accident. Consecutive hospitalizations resulting from the same injury shall be considered as one (1) hospitalization.
13. **Ambulance Fees**
We will reimburse the actual charges incurred for necessary ambulance services rendered in Malaysia to and/or from the Hospital up to the amount specified in the Table of Benefits provided such ambulance fees were incurred as a result of an Accident to the Insured Person.
14. **Sinseh or Traditional Treatment**
We will reimburse up to the amount specified in the Table of Benefits for the actual cost of sinseh or traditional treatment provided by a licensed Sinseh or Traditional Medicine practitioner including medicine as a result of an Accident, provided that the treatment is received within ninety (90) days of the Accident and the Insured Person had first consulted a Medical Practitioner.
15. **Prosthesis / Wheelchair Benefit**
We shall reimburse the actual costs of purchasing any of the following medical equipment up to the amount specified in the Table of Benefits, in the event the Insured Person suffers Permanent Disablement due to an Accident. Provided always that such medical equipment is necessary to assist in the mobility of the Insured Person and are recommended by the attending specialist Medical Practitioner.
 - (i) wheelchair
 - (ii) artificial arm or leg
 - (iii) crutches
16. **Travel Expenses**

We will pay up to the amount specified in the Table of Benefits for travel expenses incurred by the Insured Person's Parent or Guardian in the event that the Insured Person is hospitalized at a Hospital located within Malaysia as a result of an Accident.

TABLE OF COMPENSATION

Item	Benefits	Percentage of Capital Sum Insured
1	ACCIDENTAL DEATH (occurring within twelve calendar months of the Accident)	100%
2	PERMANENT DISABLEMENT (occurring within twelve calendar months of the Accident)	
	Loss of two limbs	100%
	Loss of both hands or of all fingers and both thumbs	100%
	Loss of sight of both eyes	100%
	Total paralysis	100%
	Injuries resulting in being permanently bedridden	100%
	Any other injury causing total permanent disablement which prevents the Insured Person from engaging in or attending to employment or occupations of any and every kind	100%
	Loss of arm at shoulder	100%
	Loss of arm between shoulder and elbow	100%
	Loss of arm at elbow	100%
	Loss of arm between elbow and wrist	100%
	Loss of hand at wrist	100%
	Loss of leg	100%
	- at hip	100%
	- between knee and hip	100%
	- below knee	100%
	Eye : loss of	100%
	- whole eye	100%
	- all sight in one eye	100%
	- all sight in one eye except perception of light	50%
	- lens of one eye	50%
	Loss of four fingers of one hand	40%
	Loss of thumb	30%
	- both phalanges	15%
	- one phalanx	15%
	Loss of index finger	10%
	- three phalanges	5%
	- two phalanges	8%
	- one phalanx	5%
	Loss of middle finger	3%
	- three phalanges	6%
	- two phalanges	5%
	- one phalanx	3%
	Loss of ring finger	5%
	- three phalanges	3%
	- two phalanges	5%
	- one phalanx	5%
	Loss of little finger	4%
	- three phalanges	3%
	- two phalanges	4%
	- one phalanx	4%
	Loss of metacarpals	3%
	- first or second (additional)	3%
	- third fourth or fifth (additional)	20%
	Loss of toes	8%
	- All	3%
	- great, both phalanges	2%
	- great, one phalanx	100%
	- other than great if more than one toe lost, each	75%
	Permanent Loss of speech & hearing in both ears	25%
	Loss of hearing	50%
	- both ears	2.5%
	- one ear	5%
	Loss of speech	12.5%
	Shortening of arm	5%
	- more than 1" up to 2"	10%
	- more than 2" up to 4"	25%
	- more than 4"	
	Shortening of leg	
	- more than 1" up to 2"	
	- more than 2" up to 4"	
	- more than 4"	
	The degree of shortening of arm/leg is to be certified in medical report from a medical specialist	

Provided always that:

- (a) It is fundamental and absolute term of this Policy that under no circumstances would We be liable to make any payment in excess of the capital sum insured in respect of any claim(s) under this Policy.
- (b) Where the injury is not specified, We reserve the right to adopt a percentage of disablement which, in its absolute discretion is not inconsistent with the provisions of the Table of Compensation.
- (c) Loss means in the case of limbs and digits loss by physical severance or permanent total loss of use. Loss of speech shall mean total inability to communicate verbally.

- (d) The aggregate of all percentage payable in respect of any one Accident shall not exceed one-hundred percent (100%). In the event of a total of one-hundred percent (100%) having been paid during the period of this Policy, all insurance hereunder shall immediately cease to be in force. All other losses lesser than one-hundred percent (100%) if having been paid shall reduce the coverage by that amount from the date of Accident until the expiry of this Policy.

GENERAL EXCEPTIONS

This Policy does not cover death or any injury / disablement directly or indirectly caused by or in connection with any of the following:-

1. insanity, committing or attempting to commit suicide (whether sane or insane), intentional self -inflicted injuries or any attempt thereat;
2. any form of sickness, illness, disease, infection or parasites and/or Acquired Immune Deficiency Syndrome (AIDS) or AIDS Related Complex (ARC) or Human Immunodeficiency Virus Infection (HIV).
3. congenital defect, pre-existing physical or mental defect or infirmity.
4. provoked murder or assault, willful exposure to needless peril except in an attempt to save human life.
5. while travelling in an aircraft as a member of the crew, except only as a fare-paying passenger in an aircraft licensed for passenger service.
6. while participating in unlawful activities or committing or attempting to commit any unlawful act.
7. while participating in any professional sports.
8. martial arts or boxing, aerial activities including parachuting and hang-gliding, underwater activities exceeding fifty (50) meters in depth, mountaineering involving the use of ropes or mechanical guides.
9. racing (other than on foot), pace-making, speed or reliability trials.
10. driving or riding without a valid driving license. This will not apply if the Insured Person have an expired license but are not disqualified from holding or obtaining such driving license under any existing laws, by-laws and regulations.
11. being under the influence of drugs except prescribed by a legally licensed Medical Practitioner (but not for the treatment of drug addiction).
12. war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, mutiny, popular uprising.
13. connection with:
 - (a) ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from combustion of nuclear fuel. Solely for the purpose of this exclusion, combustion shall include any self-sustaining process of nuclear fission.
 - (b) nuclear weapons material.

GENERAL CONDITIONS

This Policy and Schedule shall be read together as one contract and any word or expression to which specific meaning has been attached in any part of this Policy or of the Schedule shall bear such specific meaning wherever it may appear.

1. **Condition Precedent to Liability**
The due observance and fulfilment of the terms, provisions, conditions and Endorsements of this Policy in so far as they relate to anything to be done or complied with by You or any Claimant under this Policy shall be conditions precedent to Our liability to make any payment under this Policy.
2. **Notice**
Every notice or communication to be given or made under this Policy shall be delivered in writing to Us.
3. **Misstatement or Omission of Material Fact**
If Your proposal or declaration is untrue in any respect or if any material fact affecting the risk be incorrectly stated therein or contained therefrom or if this insurance or any renewal thereof shall have been obtained through any misstatement, misrepresentation or suppression or any changes in circumstances is not made known to Us or if any claim made shall be fraudulent or exaggerated or if any false declaration or statement shall be made in support thereof, then in any these cases this Policy shall be void and all Premiums paid hereunder shall be forfeited.
4. **Governing Law**
This Policy shall be interpreted and governed by the laws of Malaysia. Any action or suit against Us shall only be instituted in a Malaysian court.

5. **Alterations**

No alteration to this Policy shall be valid unless mutually agreed upon by You and Us and such mutual agreement is endorsed thereon. Should We choose to change the terms and conditions of this Policy, including any upward premium revision of this Policy, effective from the next renewal of this Policy, We will notify You of the same by notice in writing sent by ordinary post to Your last known address in our records, at least thirty (30) days before the renewal date of this Policy. Notwithstanding this, We reserve the right to unilaterally vary or amend the terms and conditions of this Policy in compliance with any statutory or regulatory requirements with immediate effect.

6. **Claims Notification, Procedure and Settlement**

- (a) Notice of injury on which the claim may be based, and which is covered by this Policy, must be given to Us not later than thirty (30) days and upon receipt of such notice We shall furnish the Insured Person with a claim form filing of proof of claim.
- (b) In case of death, reasonable notice shall be given to Us before burial or cremation and We may require to be represented at a post-mortem body of the Insured Person. We shall have the right and opportunity to make an autopsy at Our own expense where it is not forbidden by law. Immediate notice of time and place shall be given to Us of any inquest appointed.
- (c) All certificates, information and evidence required by Us shall be furnished by You or the nominee, trustee or assignee, as the case may be, as stated in the Policy and shall be in such form and of such nature as We may prescribe.
- (d) The compensation under this Policy shall only be payable by Us upon sufficient Proof in respect of such claim being tendered to Our satisfaction by You or such person(s) able to make a claim under the terms of the Policy.
- (e) The Insured Person shall seek medical treatment immediately upon any Accident and act upon any medical or surgical advice as soon as practicable.

7. **Termination of Insurance**

- (a) **Termination by You**
If You give notice to Us to terminate this Policy, such termination shall become effective on the date the notice is received or on the date specified in such notice, whichever is earlier. In the event Premium has been paid for any period beyond the date of termination of this Policy, Our short period rates shall apply provided that no claims has been made during the current Period of Insurance.

The following scale of short period rates shall apply:

<u>Period of Insurance</u>	<u>Percentage of Annual Premium to be Charged</u>
2 Months (minimum)	40%
3 Months	50%
4 Months	60%
5 Months	70%
6 Months	75%
Over 6 Months	100%

- (b) **Termination by Us**
We may give notice of termination by registered post to You at Your last known address. Such termination shall become effective thirty (30) days following the date of such notice. In the event Premium has been paid for any period beyond the date of termination of this Policy the pro-rata Premium shall be refunded to You provided that no claim has been made during the current Period of Insurance.
- (c) **Automatic Termination**
This Policy shall lapse / terminate at mid-night (standard Malaysian time) on the last day of the Period of Insurance.

8. **Arbitration**

All differences arising out of this Policy shall be referred to the decision of an Arbitrator to be appointed in writing by the parties in difference or if they cannot agree upon a single Arbitrator to the decision of two Arbitrators one to be appointed in writing by each of the parties within one calendar month after having been required in writing so to do by either of the parties or in case the Arbitrators do not agree of an Umpire appointed in writing by the Arbitrators before entering upon the reference. The Umpire shall sit with the Arbitrators and preside at their meetings and the making of an Award shall be a condition precedent to any right of action against Us.

9. **Territorial Limit**

This Policy provides cover on 24 hours worldwide basis.

10. **Residence or Travel Overseas**

No benefit or coverage whatsoever shall be allowed if the Insured Person resides or travel outside Malaysia for more than ninety (90) consecutive days.

11. **Cooling-off Period**

If this Policy shall have been issued and for any reason whatsoever You decide not to take up the Policy, You may return the Policy to Us for cancellation provided such request for cancellation is delivered by You to Us within fifteen (15) days from the date of delivery of the Policy and no claims have been made. You are entitled to the return of the full premium paid less deduction of any expenses incurred by Us in the issuance of the Policy

12. **Data Privacy Notice**

You hereby agree that by using our services and providing your personal data to us, you consent to Generali's collection, use, disclosure and/or processing of your personal data as described in the Data Privacy Notice made available at our website www.generali.com.my. We reserve the right to update and amend our Data Privacy Notice from time to time. We will notify you of any amendments to our Data Privacy Notice via announcement on our website or other appropriate means.

CLAUSES/ENDORSEMENTS/WARRANTY

1. Premium Warranty

It is a fundamental and absolute special condition of this contract of insurance that the Premium due must be paid and received by Us within sixty (60) days from the inception date of this Policy / Endorsement / renewal certificate.

If this condition is not complied with then this contract is automatically cancelled and We shall be entitled to the pro-rata Premium for the period they have been on risk.

Where the Premium payable pursuant to this warranty is received by Our authorised agent, the payment shall be deemed to be received by Us for the purposes of this warranty and the onus of proving that the Premium payable was received by a person, including an insurance agent, who was not authorised to receive such Premium shall lie on Us.

2. Conveyance Limit Clause

It is hereby declared and agreed that Our maximum liability per conveyance in the event a number of Insured Person are travelling in one common aircraft or surface transport vehicle or waterborne vessel shall be limited to RM10,000,000.00 or up to the total sum insured, whichever is lower. In the event the aggregate sum payable exceeds the said amount, We shall settle the claims of the respective Insured Person on a proportionate basis.

3. Service Tax

The Premium payable by you is subject to the Service Tax Act 2018, including any subsidiary legislations, orders or regulations governing the application of such tax, as may be imposed, or amended by the relevant authorities from time to time.

When we pay a claim, the amount of claims paid (including any service tax imposed by the relevant authorities) shall be subject to the sum insured or limits of insurance covered under the Policy.

4. Sanction Limitation & Exclusion Clause

No Insurer shall be deemed to provide Cover and no (re) insurer shall be liable to pay any claim or provide any Benefit hereunder to the extent that the provision of such Cover, payment of such claim or provision of such Benefit would expose that (re) insurer to any sanction, prohibition, or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United States of America, or Malaysia.

5. Territorial Exclusion Clause

The Insurer shall not indemnify the Insured for any liability:

- (i) in respect of any judgment, award, payment, legal costs and expenses or settlement delivered, made or incurred where legal actions are brought in a court of law within countries which operate under the laws of "Excluded Countries/Territories", or any order made anywhere in the world to enforce such judgment, award, payment, legal costs and expenses or settlement either in whole or in part;
- (ii) incurred by the government of "Excluded Countries/Territories" or resulting from activities that involve or benefit the government of "Excluded Countries/ Territories", or where the payment of such indemnity by the Insurer will benefit the government of "Excluded Countries/Territories";
- (iii) in respect of any settlement agreed or incurred outside of a court of law, prior to any legal actions being brought, by, or to the benefit of, persons or entities resident in "Excluded Countries/Territories"; Entities shall include any parent company, direct or indirect holding company owned or controlled by the government of "Excluded Countries/Territories", persons or entities resident in "Excluded Countries/Territories".

List of Excluded Countries/Territories

1. Israel
2. Iran
3. Syria
4. North Korea
5. Crimea Region and the Zaporizhzhia, Kherson, Donetsk and Luhansk People's region
6. Belarus
7. Russian Federation

Please refer to the latest Excluded Countries / Territories list at www.generali.com.my

6. Communicable Disease Exclusion LMA5394

1. Notwithstanding any provision to the contrary within this insurance agreement, this insurance agreement excludes any loss, damage, liability, claim, cost or expense of whatsoever nature, directly or indirectly caused by, contributed to by, resulting from, arising out of, or in connection with a Communicable Disease or the fear or threat (whether actual or perceived) of a Communicable Disease regardless of any other cause or event contributing concurrently or in any other sequence thereto.
2. As used herein, a Communicable Disease means any disease which can be transmitted by means of any substance or agent from any organism to another organism where:
 - 2.1 the substance or agent includes, but is not limited to, a virus, bacterium, parasite or other organism or any variation thereof, whether deemed living or not, and
 - 2.2 the method of transmission, whether direct or indirect, includes but is not limited to, airborne transmission, bodily fluid transmission, transmission from or to any surface or object, solid, liquid or gas or between organisms, and
 - 2.3 the disease, substance or agent can cause or threaten damage to human health or human welfare or can cause or threaten damage to, deterioration of, loss of value of, marketability of or loss of use of property. Bodily Injury, illness, emotional distress or damage to human health, human welfare or property damage.

TABLE OF BENEFITS

Benefits		Sum Insured Per Student (RM)		
		P10	P20	P30
1.	Accidental Death	15,000	20,000	30,000
2.	Accidental Permanent Disablement	50,000	50,000	100,000
3.	Accidental Death on Public Common Carrier*	N/A	20,000	30,000
4.	Accidental Death in School Premise*	N/A	20,000	30,000
5.	Compassionate Death Benefit	1,000	2,000	2,000
6.	Bereavement for Death Due to Dengue	10,000	10,000	10,000
7.	Kidnapping Extension	N/A	20,000	30,000
8.	Education Allowance	N/A	20,000	25,000
9.	Allowance for School / Tuition Fees	N/A	200	400
10.	Accidental Medical Expenses	2,000	3,000	4,000
11.	Accidental Dental Benefit	N/A	250	500
12.	Hospital Cash Allowance**	50	100	100
13.	Ambulance Fees**	100	150	250
14.	Sinseh or Traditional Treatment	N/A	250	250
15.	Prosthesis / Wheelchair Benefit	N/A	1,000	1,000
16.	Travel Expenses**			
	a) Government Hospital	N/A	50	100
	b) Private Hospital	N/A	25	50

*in addition to the Accidental Death Benefit

**hospitalised or services rendered in Malaysia only