

University of New Orleans
Online International Student Insurance Waiver Form
Fall 2020

This form must be submitted to the Office of International Students and Scholars at oiss@uno.edu by 4:30 p.m. on Tuesday, August 25, 2020. No late requests will be accepted.

Last Name: _____ First Name: _____ UNO ID NUMBER: _____

Please choose one:

_____ I am a new student who has not attended UNO in the past.

_____ I am a continuing UNO student in F-1 status.

_____ Other (please describe below)

I certify that I plan to study online from my home country for the Fall 2020 semester. I will not enter the United States during the semester, which begins on 08/19/2020 and ends on 12/10/2020. **I understand that continuing F-1 students must enroll full time to maintain status outside the U.S.**

Signature of Student (Required) _____ Date _____