

**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](mailto:oiss@uno.edu) by 4:30 p.m. on Friday, August 28, 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)

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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 \_\_\_\_\_