



Health and Dental Benefits Plan Request to Opt-In (DALs)

Students who have self disclosed with the Department of Accessible Learning at North Island College may request to "Opt-In" to the North Island Students' Union extended Health and Dental plan if they are taking a minimum of two courses in a qualified program in the Fall or Winter term. Please return this form to a North Island Students' Union office during office hours or email to healthanddental@nisu.ca. Please do not leave forms under office doors.

PERSONAL AND CONTACT INFORMATION

NAME _____ DATE OF BIRTH YYYY/MM/DD _____

EMAIL _____ STUDENT NUMBER _____

MOBILE NUMBER _____ CAMPUS OF STUDY _____

ADDRESS _____

Please have a faculty member from Department of Accessible Learning sign and date form to verify DALs status and that student is enrolled in a minimum of two courses.

DATE OF VERIFICATION YYYY/MM/DD FACULTY SIGNATURE _____

FACULTY NAME _____ FACULTY POSITION _____

The North Island Student's Union policy requires that students who are enrolled in only two courses in a qualified program may opt-in to the Extended Health and Dental Benefits Plan if they:

1. Have self disclosed DALs status (NISU does not require specifics about accommodation)
2. Complete this form within the posted opt-out period. (September 30th & January 31st respectively)

DAL students who are registered in more than three courses will automatically be included in the plan provided they meet the enrollment criteria.

DATE OF APPLICATION YYYY/MM/DD _____

RECEIVED BY NISU OFFICE YYYY/MM/DD _____