

**Erasmus+ International
Mobility with Partner Countries (KA107)
REQUEST FOR INSURANCE SUPPORT**

----Please complete electronically----

Participant and duration of mobility

Participant First Name		Participant Last Name	
Participant E-mail		Participant Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Undefined <input type="checkbox"/>
Date of birth (dd/mm/yyyy)		Nationality	
Passport No.		Valid until	
Home address		Phone number	
Home University		Host University	
Mobility Type	STA Staff Mobility for Teaching <input type="checkbox"/>	STT Staff Mobility for Training <input type="checkbox"/>	SM: Student Mobility <input type="checkbox"/> <input type="checkbox"/> Undergraduate <input type="checkbox"/> MA <input type="checkbox"/> PhD
Mobility period envisaged start date		Mobility period envisaged end date	
Requested starting date of insurance		Requested end date of insurance	

Request for insurance support - Declaration by the Participant

According to the GRANT AGREEMENT for Erasmus+International Mobility, Article 5 "Insurance", the participant must have adequate health and accident insurance coverage in relation to illness, accident, death, permanent disability and third party liability. The cover must take effect by the time the participant starts the journey to participate in the programme and last for periods of at least 4 weeks. The insurance may start 7 days before and end 7 days after the agreed starting/end date of mobility. If you wish a longer duration please explain the reasons.

I hereby request Humboldt-Universität zu Berlin to conclude for me on my behalf and on my account the insurance PROTRIP-WORLD PLUS with worldwide validity, except in the home country as follows:
 I have read and understood the offer by HU for assistance in establishing my personal insurance coverage. I am aware that the ERASMUS+mobility support scheme does not any provide extra funds for personal insurance of participants and that appropriate insurance coverage is my personal responsibility. Therefore, I entitle HU IO to conclude the above insurance contract on my behalf and account, the payment of the insurance premium shall be fully supported from my Erasmus+Individual support grant and HU is hereby entitled to deduct the respective amount from this grant.

Place: _____ date: _____ Participant first name, last name: _____

This document has been electronically established, therefore I accept the above conditions by typing my name.

Attention: Your insurance request will be processed after the confirmation of your Erasmus+International mobility but preferably before your visa application. Your personal insurance policy, provided to you by Humboldt University may facilitate and support the visa process. Please send this insurance request together with your application form to erasmus.international@hu-berlin.de

e-mail reference (Participant e-mail): _____

Participant full name, home university: _____

Insurance conditions:

Insurance coverage in the group insurance PROTRIP-WORLD PLUS Scheme with worldwide validity, except in the home country. Coverage starts 2 months maximum before the registered starting date and ends 3 months maximum after the registered end date of the programme. The Group Policy consists of Overseas Health Insurance, Personal Liability Insurance, Accident Insurance and Assistance Insurance

The following conditions apply:

- Overseas Health Insurance with unlimited coverage of inpatient and outpatient treatment
- Emergency Assistance Abroad including medical repatriation
- Dental treatment for pain relief including simple fillings as well as repair of existing dentures and dental prosthesis per case up to 500 €, medically necessary dental treatment as a result of an accident up to 1,000 €
- Outpatient initial treatment of mental illnesses up to 1,500 €, inpatient emergency treatment of first-time mental or emotional disorders up to 20,000 €
- Personal liability insurance lump sum for personal injury and / or damage up to 1,000,000 €
- Overseas Accident Insurance: Disability max. amount 30.000 € (350% disability classification), accidental death 10.000 €
- The insurance premium is 0.90 € per day, to be concluded for a minimum of 30 days (27 €).
- HU IO shall conclude the insurance contract for the participant on his/her behalf, account and pay the premium directly to the insurance.
- HU IO shall provide the Participant the Insurance police by e-mail in advance to the starting date of the mobility preferably early enough to support the visa procedures, provided the current request for insurance support has been submitted in due time.