



Kaohsiung Medical University【Abandon the Student Group Insurance Affidavit】

Program of Study:

- Bachelor Ph.D.
 Master's Degree In-service Master Program Two-year in-service Master Program

(Please refer to the precautions before filling out the form) Date : (mm-dd-yyyy)

Precautions :

1. According to the regulations of MOE, students who decide to abandon the student group insurance will not be subsidized and are required to sign an affidavit letter. For students under the age of 18, the signature of a parent/guardian or legal representative is necessary.
2. No liability or responsibility is accepted under any circumstance for those who abandon the student group insurance.
3. **Please refer to the Division of Health Service if any assistance is needed** (07-3121101 to 2117).
(Address: 807, No 100, Kaohsiung City, Sanmin District, Shihcyuan 1st road)
KMU Division of Health Service 【CS108】 Applicant's Signature:

Name _____, Student ID _____, Department _____

Due to Health Family Economy Occupational Academic Military service
 Personal Re-taking exams Suspension Deferred graduation Other _____
 issues, abandon the student group insurance. (From _____ (mm-dd-yyyy) to _____
 (mm-dd-yyyy)), hereby certify.

Notice:
 ◎ **Minors (under the age of 18) must have the signature of a parent/guardian or legal representative.**

Applicant: Parents/Guardian Students Legal representative

Applicant: _____ Signature

ID No: _____
 Contact No: _____ Cell No: _____

Address: _____