

OPTIONAL ON-CAMPUS HEALTH BENEFIT

SIU Students may be eligible to purchase the Optional On-Campus Health Benefit (OOCHB) when they are currently taking courses that were NOT assessed the On-Campus General Fee, or for ONE additional semester immediately following a semester in which they were taking SIU courses. Student Spouses may be eligible to purchase the OOCHB if they are the spouse of an SIU student who is currently eligible or the spouse of an SIU Student who has already purchased the OOCHB for the current semester.

A. Student Information

Name (last, first, middle)		Birth Date	Dawg Tag #
Address		City / State	Zip Code
Home Phone	Work Phone	E-mail	

B. Spouse/Domestic Partner Information (complete only if purchasing coverage for your spouse/domestic partner)

Name (last, first, middle)		Birth Date	
Address		City / State	Zip Code
Home Phone	Work Phone	E-mail	

C. Fees (check all that apply)

Term	Year	Student	Spouse / SSDP
Fall		<input type="checkbox"/> \$269	<input type="checkbox"/> \$269
Spring		<input type="checkbox"/> \$269	<input type="checkbox"/> \$269
Summer		<input type="checkbox"/> \$159	<input type="checkbox"/> \$159

Signature of Student _____ Date _____

Signature of Spouse / Domestic Partner _____ Date _____

D. Payment *Required Field

<input type="checkbox"/> Cash <input type="checkbox"/> Check Make check payable to SIUC Student Health Center.	
<input type="checkbox"/> Master Card <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> American Express	
*Card #	CVV #
*Expiration Date	
Card Holder Signature	

Official Use Only

Processed By	Date
Effective Date	Termination Date
<input type="checkbox"/> Student Enrollment Verified	



SOUTHERN ILLINOIS UNIVERSITY
STUDENT HEALTH SERVICES

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