

OSHC REQUEST FORM



AUSTRALIAN
LEADING
INSTITUTE OF
TECHNOLOGY

Student Name	:	<input type="text"/>
Student Number	:	<input type="text"/>
Date of Birth (dd/mm/yyyy)	:	<input type="text"/>
Course	:	<input type="text"/>
Class Group	:	<input type="text"/>
Email	:	<input type="text"/>
Phone Number	:	<input type="text"/>

Please select relevant option(s):

First Issue

6 Months - Single Cover

12 Months - Single Cover

6 Months - Family Cover

12 Months - Family Cover

Related to your VISA requirements only

Renewal

Membership Number

:

Card Re-issue (replacement for lost card)

Membership Number

:

Student Acknowledgement:

- I understand that I must have paid the OSHC fee before I apply/renew my overseas health cover.
- ALIT will forward my request to relevant Authorities and I understand that it may take up to 10 working days from the date this OSHC Request Form is received at ALIT for my membership details/card to be ready for collection.
- I understand that I will be contacted via my ALIT Student Email Account once the card has been issued, and it is my responsibility to collect it from ALIT Student Services in a timely manner.

Student Signature

Date

ALIT OFFICE USE ONLY:

Authorised by:

Student Services Officer Signature

Date