CISI Comprehensive Medical and Evacuation Insurance Application: Faculty & Staff on non-study abroad, university-affiliated international travel

Faculty/Staff Name:	First	Middle
Faculty/Staff W&M ID#:		
Program Account Number: W-1Y0439	-580345	
CISI Fee: \$	(\$52.00 per month– see)	below)
Please make checks payable to: The Co	llege of William & Mary. Do not	t send currency or cash by mail.
Mailing Address:	Street Ac	ddress:
Cashier's Office	Cashier's	s Office
The College of William & M	Mary 101 Blow	w Hall, Richmond Road
PO Box 8795	•	ne: (757) 221-1226
Williamsburg, VA 23186-87	1	` ,

To calculate the amount you owe:

Coverage begins on your departure date, and is billed in monthly increments (\$52 per month). Billing starts from the first day of W&M-related travel and stretches for 1 month (Example: 2/15-3/15 is considered a "month"). This monthly rate is not pro-rated, but there is a 5 day grace period before you must pay for an additional month of coverage. Please see the examples below for how to calculate your cost. If after reviewing the examples you have questions, contact Nick Vasquez at the Reves Center (snvasquez@wm.edu, 757-221-1146).

Departure date 8/28 and return date 12/3 (5 day grace period applies).

Months are calculated:

Month 1 (8/28-9/28)

Month 2 (9/28-10/28)

Month 3 (10/28-11/28)

5 day grace period (11/29-12/3); because you are returning during your grace period, you do not need to pay for an additional month.

You owe: 3 months x \$52 = \$156

Departure date 8/28 and return date 12/15 (5 day grace period does not apply)

Months are calculated:

Month 1 (8/28-9/28)

Month 2 (9/28-10/28)

Month 3 (10/28-11/28)

Month 4 (11/28-12/28); though your stay is shorter than the full month, coverage is not pro-rated, so you must still pay for an additional month.

You owe: 4 months x \$52 = \$208