

University of Houston System Foreign Travel Insurance

The University of Houston System has in place a foreign travel insurance program. This program provides insurance coverage for faculty, students, and staff and other travelers while traveling abroad. The elements of the coverage are as follows:

FOREIGN GENERAL LIABILITY

This provides coverage for the University if found liable for personal injury or damages to premises or property of others.

FOREIGN AUTOMOBILE LIABILITY

This provides coverage for hired and non owned autos. In the event of an accident it will protect the University from liability if found to be liable for losses related to the rented or hired vehicles.

ACCIDENTAL DEATH AND DISMEMBERMENT

This provides benefits to the traveler or beneficiaries in the event of serious injury or death.

ACCIDENT AND SICKNESS MEDICAL EXPENSES

This covers medical expenses if the traveler becomes injured or ill while traveling abroad.

EMERGENCY MEDICAL EVACUATION

This will pay for evacuation to a medical care facility in the event of a serious accident or illness. Also covers evacuation to the home country if necessary.

EMERGENCY FAMILY TRAVEL

This will provide funds for family members to travel to the foreign location should the traveler become seriously ill or injured and cannot be evacuated.

REPATRIATION OF REMAINS

This provides coverage to return the traveler's remains to the home country in the event of death during a trip.

INSTRUCTIONS TO BUY INSURANCE

For this coverage to be placed into effect you must notify the Environmental Health and Risk Management Department (EHRM) at least two weeks in advance of your trip. There is a fee associated for this coverage and it will be dependant upon the number of travelers, locations and the duration of the trip. Please complete the attached request for insurance coverage form and return it to EHRM for coverage to be in effect.

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University of Houston
Environmental Health and Risk Management

Request for Foreign Travel Insurance Coverage & Authorization for Premium Payment

- Use this form to request coverage for foreign travel insurance for faculty, students, staff and others.
- The Environmental Health and Risk Management Department will make payment to the insurance carrier or agency directly from the specified account using this documentation as authorization.
- **Please return this completed form within 14 days of departure to assure coverage.**

Dates of Travel (duration): _____

Number of Travelers: Faculty/Staff _____ Students _____ Others _____

Country(s) traveled to: _____

Do not include layovers

Requesting Department: _____

Program: _____

Department Contact: _____ UH Telephone: _____

FAX: _____ UH Mail Code: _____ Business Unit: _____

Fund Code: _____ Dept. Code: _____

Program Code: _____ Project ID: _____

Speed Type: _____

*NOTE: Only local funds may be used for purchase of insurance coverage. The use of ledger-5 Funds must be approved by the Division of Research prior to the purchase.

“I certify that the insurance coverage described above has been requested and that I authorize the recording of the expense for this coverage to the referenced account.”

Printed Name, Certifying Signature: _____

Signature: _____ Date: _____

Return the original form to: Environmental Health and Risk Management at: Campus Mail: 1005 For expedited coverage you may email or fax the form before mailing the original. Fax: 713-743-8035
bdunderw@central.uh.edu Phone: 713-743-5858