

SHIP INSURANCE PLAN ACADEMIC YEAR 2024-25
Dependent Enrollment

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Student Legal Name

Vandal ID Number

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Address

Date of Birth

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Vandal Email Address

Dependent Coverage

- Spouse
- Child
- 2 or more Children
- Spouse+2 or more Children

Cost Per Dependent

- \$1,100.00 per Semester
- \$1,100.00 per Semester
- \$2,200.00 per Semester
- \$3,300.00 per Semester

I am enrolling my dependent(s) for the following semester:

- Fall 2024
 Spring 2025
 Summer 2025

**Please note that this form needs to be done every semester you wish to have dependent coverage*

ADDING DEPENDENTS:

Last Name	First Name	Date of Birth	Gender	Relationship

Signature

Date