APPENDIX C

Northeast Ohio Medical University Student International Experience STUDENT CHECKLIST

The following documents must be submitted to the Global Engagement Office, L - 214 <u>at least four weeks prior</u> to their departure date:

Proof of insurance with the following minimum coverage (from one of the agencies at

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(a) (b) (c) (d)	Medical Expense (accident/sickness)—\$100,000 per incident Accidental Death/Dismemberment—\$10,000 Emergency Medical Evacuation—\$50,000 Repatriation of Remains—\$25,000
Proof of travel consult and vaccinations and prophylaxis recommended by the Center for Disease Control—APPENDIX D	
Photocopy of current passport (and proof of visa if applicable)	
Photocopy of current U.S. State Department travel advisories	
Complete travel itinerary (including travel to, from, and during international experience)	
Emergency contact information—APPENDIX E	
Proof of registration with the Department of State Smart Traveler Enrollment Program	
Signed Waiver and Release Agreement—APPENDIX F	