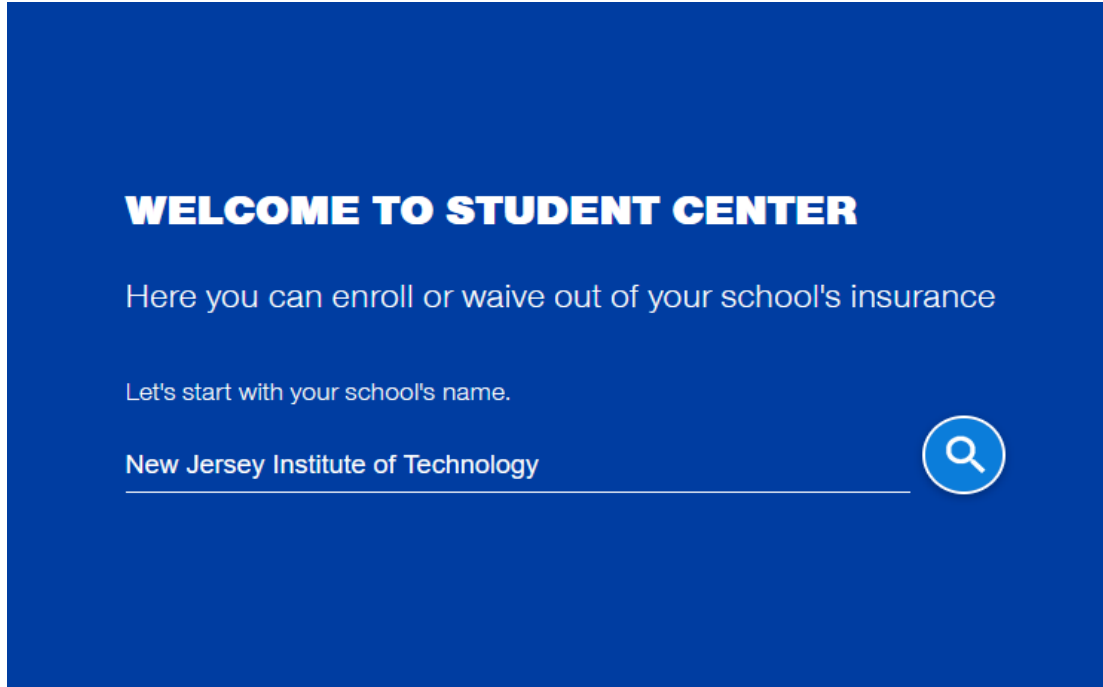



Go to www.uhcsr.com. And select New Jersey Institute of Technology



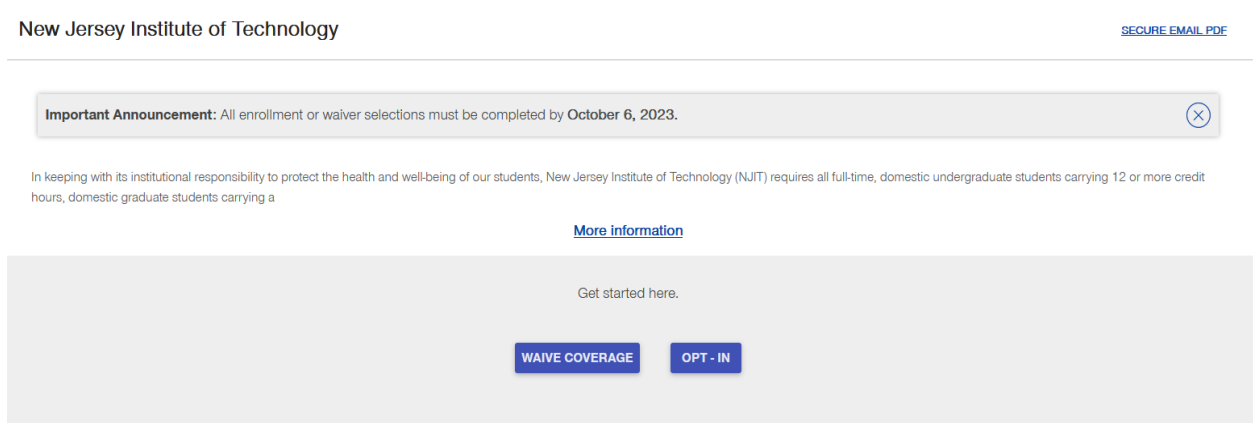
WELCOME TO STUDENT CENTER

Here you can enroll or waive out of your school's insurance

Let's start with your school's name.

New Jersey Institute of Technology 

Step 1 click the button “Waive Coverage”



New Jersey Institute of Technology [SECURE EMAIL PDF](#)

Important Announcement: All enrollment or waiver selections must be completed by **October 6, 2023.**

In keeping with its institutional responsibility to protect the health and well-being of our students, New Jersey Institute of Technology (NJIT) requires all full-time, domestic undergraduate students carrying 12 or more credit hours, domestic graduate students carrying a

[More information](#)

Get started here.

[WAIVE COVERAGE](#) [OPT - IN](#)

Step 2 Complete your personal information

Step 2 - Personal Information

• • • • •

* Required

Student First Name * Student Last Name * Gender *

Please Select ▼

Email *

Student ID * Students Date of Birth *
_____ (E.g. mm/dd/yyyy)

Campus Location *
New Jersey Institute of Technology ▼

BACK **SAVE AS DRAFT** NEXT

Step 3 Complete the waiver questionnaire and click "Next"

Step 3 - Waiver Questions

• • • • •

Please answer the following questions to determine if your current coverage exempts you from purchasing the school's recommended insurance coverage.
[Read More](#)

1. Will your coverage remain in force for the remainder of the academic year? Yes No

2. Does your plan provide both emergency and non-emergency healthcare and mental health benefits? Yes No

3. Does your plan provide prescription drug coverage? Yes No

4. Does your plan have in-network hospitals, physicians, pharmacies and mental health providers within 50 miles of campus? Yes No

5. I understand the insurance information I am providing may be reviewed for approval upon submission of this waiver request. Yes No

BACK **SAVE AS DRAFT** NEXT

Step 4 – Complete your insurance information

Waive Coverage (Previously Saved Waiver Request is Being Continued)



Step 4 - Insurance Information



* Required

Member ID or Policy Number *

Group Number (If none, type N/A) *

Policy Holder First Name *

Policy Holder Last Name *

Policy Holder Date of Birth *

Policy Holder Relationship to Student *

Policy Holder Gender *

Insurance Company Name *

(If you cannot find your insurer name, please type 'Other' in the search box)

Insurance Company Phone *

E.g. (xxx-xxx-xxxx)

Policy Holder Address *

Policy Holder City *


State *

Step 4 (cont.) Upload a copy of the front & back of insurance id card as proof of coverage and click Next

Policy Holder Zip Code *

Upload Proof of Other Insurance *

Please Upload the **Front and Back** of your ID card or proof of coverage



The upload area contains a dashed rectangular box for the image. Inside this box is a smaller solid rectangular box with a paperclip icon and a small 'x' in the top right corner. Below the dashed box is a button with an upward-pointing arrow icon and the text 'Select file'.

BACK SAVE AS DRAFT NEXT

Step 5 – Sign and submit the waiver

Waive Coverage



Step 5 - Sign and Submit



* Required

Note: To avoid issues with your submission, we recommend you use a Wifi or other high speed internet connection.
Once you submit, please be patient while the system is processing your submission.

I am affirming that my insurance policy will provide the coverage as outlined above. I hereby release New Jersey Institute of Technology of any responsibility of my health care and I will assume all financial responsibility related to my health care while attending the New Jersey Institute of Technology.

Signature *

_____ 07/26/2023

BACK

SUBMIT

Once the waiver is submitted you will receive the following message.



Dear Student,

Thank you for submitting your Student Health Insurance waiver request. Your waiver request is Pending Verification while we confirm that you have active coverage that meets the requirements established by New Jersey Institute of Technology.

You will receive an email confirming the status of your waiver once this review is complete.

Please allow up to 5 business days to receive a response.

Thank You.

CLOSE