|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Kammarkollegiet |  | |  |
|  | |  |
|  | |  |
|  |  | 2018-01-01 |  | |
|  |  |  | | |

Insurance Certificate

This certificate is issued under the authority of the Kammarkollegiet. The insurance is backed by the full faith and credit of the Swedish government.

This is to certify that Name Family name is covered by “ *Insurance for foreign visitors*”, *terms and conditions of insurance 1 January 2018*.

Date of Birth: Month dd, yyyy

Policy holder: Umeå University

Insurance policy number: 202100-2874

The insurance is valid during the period

**Month dd, yyyy through** **Month dd, yyyy**

**The insurance includes:**

1. Full coverage of medical costs in the event of medical emergency. No limitation in amount.
2. Coverage up to SEK 3 000 for emergency dental treatment per year. Emergency dental care involves relieving the patient of pain and infection, provisional filling of holes and ensuring a functional biting area.
3. Full coverage of costs for medical evacuation or repatriation of remains. No limitationin amount.
4. Liability coverage up to 3 million SEK.

**The insurance applies:**

The insurance applies 24-hours a day in the whole Schengen zone if the insured has a Schengen visa, as well as departure from home country for direct journey to the Schengen zone up to arrival in home country following direct journey there from the Schengen zone. If the insured person does not have a Schengen Visa, the insurance is only applicable in Sweden.

On behalf of Kammarkollegiet

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and status of representative

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of the representative Stamp or seal of the institution