Verification of Student Status

RoyalStar House
John F. Kennedy Drive
Nassau, Bahamas

NEW PROVIDENCE
LIFE INSURANCE COMPANY LIMITED

Information

Primary insured	Customer number
Proposed insured (Student)	DOB Day/Month/Year
Is the proposed insured a full-time college student? *If yes, please provide the required information below.* ☐ Yes ☐ No	
Name of school	
Student number	

It is agreed that this Verification of Student Status shall be a part of the application for the policy.

Please attach proof of enrollment such as a valid student ID card for the current school year or letter of verification from the college showing the student number. The college can also stamp this form and email to renewals@newprovidencelife.com.

Primary Insured Signature _____ Date _____ /_____ /_____
Day Month Year

Agent Signature _____

Questions?

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