

Overseas Medclaim Claim Form Sample for Student Travel Insurance

Download this **Overseas medclaim claim form** sample designed specifically for student travel insurance to ensure a smooth reimbursement process. This form includes all necessary sections to provide detailed medical and travel information. Using this sample helps students accurately complete their claims and avoid delays.

Sample Overseas Medclaim Claim Form (For Students)

Personal Details

Full Name:

Date of Birth:

Passport Number:

Student ID:

Policy Number:

Overseas Address:

Travel Details

Date of Departure:

Date of Return:

Country of Visit:

Medical/Claim Information

Nature of Illness/Injury:

Date(s) of Treatment:

Name and Address of Hospital/Clinic:

Treating Physician's Name:

Amount Claimed (in local currency):

Details of Expenses Incurred:

Bank Details (for Reimbursement)

Bank Name:

Account Number:

IFSC/Swift Code:

Declaration

I hereby declare that the information provided above is true and correct to the best of my knowledge and the documents attached are genuine.

☐ I agree

Date:

Signature:

Submit Claim

Note: Attach all relevant supporting documents (e.g., medical bills, passport copy, tickets, discharge summary, prescriptions) along with this form.