

Independent schools

Pupil absence insurance claim form





Claims for reimbursement of school fees must be submitted as soon as the pupil is certified fit and returns to the school. Claims for individual terms should be submitted separately and within 30 days of the end of the term they relate to.

Section 1

To be completed by the fee payer. If the claim is for a pupil absence of 14 consecutive days or more, Section 3 must be completed by the pupil's General Practitioner.

Name of pupil: Date of birth:

School name:

Name of fee payer:

Address of fee payer:
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Postcode:

Contact number: Email address:

How do you wish to be contacted?
(Please tick all the apply)

Phone:

Email:

Date of incident/illness:

Date of incapacity

From:

To:

Section 2

To be completed by the school

Name of school:

Postcode: School policy number:

Name of pupil:

Boarder or day pupil: Boarder Day

Total termly fees:

Dates of absence First day: Last day:

Please confirm that the school fees being claimed have been paid and are not outstanding:

 Paid Outstanding

Name of school official:

Signature of school official: Date:

Section 3

To be completed by the pupil's General Practitioner if the claim is for a pupil absence of 14 consecutive days or more.

Are you the patient's usual doctor? Yes: No:

Please give full details of the injury/illness and dates of incapacity:

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When did the patient first receive medical attention for this condition?

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Has the patient ever suffered with this or any similar condition before this incident?

Yes: No:

If yes, please give details:

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