

STUDENT SURAKSHA

Customer Information Sheet/Know Your Policy

This document provides key information about your policy. You are also advised to go through your policy documents.

Sl No	Title	Description	Policy Clause Number
1	Name of Insurance Product /Policy	Student Suraksha	Not Applicable
2	Policy Number	XXXXXXXX	Not Applicable
3	Type of Insurance Product/Policy	Both Indemnity and benefit	Not Applicable
4	Sum Insured (Basis)	• Plan Opted - <<_____>>	Not Applicable
		• Individual Sum Insured –	
		Insured NameSum Insured (Rs.)	
		Insured 1	
5	Policy Coverage (What the policy covers?)	Expenses in respect of:	Section II (A)
		Medical Care	
		Medical Expenses for the treatment of an injury or illness sustained by You while this policy is in effect and within the boundaries of the Trip.	
		Emergency Medical Evacuation -Expenses incurred due to transportation and medical treatment, including medical services and medical supplies necessarily incurred in connection with Emergency Medical Evacuation.	
		Medical Expenses in India as a continuation of medical treatment commenced by You while overseas immediately after any Medical Evacuation to a hospital in India, arising out of any illness or Accidental Bodily Injury during the course of Your Journey	
		Repatriation Of Remains - Reimburse for the costs of transporting the remains of the deceased back to the Republic of India or for cost of a burial in the overseas country where the death occurred subject to the maximum limit as USD 10000.	
		Emergency Dental Treatment	
		Special Extensions (Not Applicable to Basic Plan)	
	• Maternity Benefits for any claim related to normal delivery, caesarean section, and complications of maternity (including and not limited to medical complications after a waiting period of 10 months		

	<ul style="list-style-type: none"> Mental And Nervous Disorders for the condition necessitates treatment in the hospital and the hospital stay is for minimum 24 hours. 	
	Personal Accident Accidental Death and Permanent Total Disability occur within 12 months from the date of Accident, which caused the Injury. Accidental Death (Common Carrier) occur within 12 months from the date of Accident, which caused the Injury while You are riding as a passenger in or on, boarding or alighting on a common carrier, during the course of Your overseas Journey while this policy is in effect.	Section II (B)
	Personal Care Baggage Loss (Checked in baggage) - reinstate or replace the Checked Baggage in respect of the permanent total loss or destruction of Your checked in Baggage. Baggage Delay (Checked in baggage) – if Your Checked in Baggage is delayed or misdirected by a scheduled airline by more than 12 hours beyond the time of Your arrival at the intended destination outside India, we will pay You in respect of Your emergency purchase of toiletries, medication and clothing to replace those contained in Checked Baggage. Compassionate Visit (Not Applicable to Basic Plan) - reimburse the actual cost of economy class ticket by the most direct route via a common carrier incurred by the person rendering special assistance from and to the place of origin of such person or the place of residence of the person.	Section II (C)
	Travel inconvenience Loss of Passport - expenses necessarily incurred by you in obtaining a duplicate/ temporary passport overseas.	Section II (D)
	Legal Liability Personal Liability - Legal liability incurred by you in your private capacity to pay damages for the third-party civil claims arising out of Accidental bodily injury or Accidental Property Damage occurring during Your Trip overseas.	Section II (E)
	Special Allowances Tuition Fees (Not Applicable to Basic Plan) - reimburse you with the tuition fees which has already been advanced to the educational institution less possible/ actual refunds in event if you discontinue your studies for the remaining part of a school semester for which Tuition has been paid. Sponsor Protection - reimburse you the tuition fees incurred for the remaining period of your education, if the sponsor meets with an accident during the policy period, resulting in his accidental death or permanent total disability during the policy period.	Section II (F)

		Bail bond (Not Applicable to Basic Plan) - Bail amount towards the arrest or detention,	
		Felonious Assault (Not Applicable to Basic Plan) -loss as a result of a felonious assault during your Trip, occur within 365 days of the date of the accident which caused Injury	
		<i>Note: All the above covers are offered under this Product. However, the cover offerings are plan specific and shall be applicable as per the opted plan.</i>	
6	Exclusions (What the policy does not cover)	Any Pre-Existing Diseases and conditions	Section II – Exclusions applicable to Section A – (3)
		Medical Treatment if that is the sole reason or one of the reasons for temporary stay abroad.	Section II – Exclusions applicable to Section A – (4)
		Intentional self-injury (including but not limited to the use or misuse of any intoxicating drugs or alcohol).	Section II – Exclusions applicable to Section B.1 – (1)
		Accident while under the influence of alcohol or drugs	Section II – Exclusions applicable to Section B.1 – (2)
		Valuables and money, all kinds of securities and tickets/ passes or any item not declared to and agreed to by Us.	Section II – Exclusions applicable to Section C.1 – (i)
		Loss or damage to Your passport as a result of the confiscation or detention by customs, police or any other authority.	Section II – Exclusions applicable to Section D.1 – (i)
		<ul style="list-style-type: none"> Benefits will not be available for Any condition, ailment or injury or related condition(s) for which You have been diagnosed, received medical treatment, had signs and/ or symptoms, prior to inception of Your first Policy, until 48 consecutive months have elapsed, after the date of inception of the first Policy with Us. 	Section G

- Treatment abroad, if that be the sole reason or one of the reasons for Your temporary stay abroad.
- Any claim relating to events occurring before the commencement of the trip covered hereunder and any time after the completion of the trip at first port of the Country of Your Residence mentioned hereunder.
- If the claim be in any respect fraudulent, or if any false declaration be made or used in support thereof.
- In so far as it relates to all the benefits and if You are/ have:
 - a. travelling against the advice of a Medical Practitioner.
 - b. receiving, or are on a waiting list to receive, specified medical treatment declared in a Medical Practitioner's report or certificate.
 - c. received terminal prognosis for a medical condition.
 - d. taking part in a naval, military or air force operation.
- The amount /time mentioned as Deductibles in the Policy Schedule.
- Congenital anomalies or any complications or conditions arising from.
- Any loss resulting directly or indirectly contributed or aggravated or prolonged by childbirth or from pregnancy. (applicable for Basic Plan)
- Injury or Disease directly or indirectly caused by or contributed to by nuclear weapons/ materials.
- Suicide, attempted suicide (whether sane or insane) or intentionally self-inflicted injury or illness, or sexually transmitted conditions, anxiety, stress or depression, Acquired Immune Deficiency Syndrome (AIDS), Human Immune Deficiency Virus (HIV) infection.
- Being under the influence of drugs, alcohol, or other intoxicants or hallucinogens unless properly prescribed by a Medical Practitioner and taken as prescribed.
- Participation in an actual or attempted felony, riot, crime, misdemeanor, or civil commotion.
- Operating or learning to operate any aircraft, or performing duties as a member of the crew on any aircraft
- Air travel unless you are flying as a passenger on an Airline
- Participation in skydiving/ parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing (where ropes or guides are customarily used), riding or diving in races or rallies using a motorized vehicle or bicycle, caving or potholing, hunting or equestrian activities, skin diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or

		<p>boating outside coastal waters (2 miles), participation in any professional sports, any bodily contact sport or any other potentially dangerous sport for which you are untrained.</p> <ul style="list-style-type: none">• Illness and accidents that are results of war and warlike occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power, active participation in riots, confiscation or nationalization or requisition of or destruction of or damage to property by or under the order of any government or local authority.• In respect of Your travel to any country against whom the Republic of India has imposed general or special travel restrictions, or against whom it may impose such restrictions, or any country which has imposed or may impose subsequently, such restrictions against travel by a citizen of the Republic of India to such country.															
7	Waiting period	Not Applicable	Not Applicable														
8	Financial Limits of Coverage	The Policy will pay only up to the Sub limits specified hereunder for the following diseases/procedures. In case of claim, this policy require you to share the following costs: Expenses exceeding the following Sub-limits.															
	i. Sub Limits- (It is a predefined limit, and the insurance company will not pay any amount in excess of this limit)	Please refer to point no. 14 (Benefit Chart)															
	ii. Co-payment – (It is a specified amount /percentage of the admissible claim amount to be paid by policy holder/ Insured)	Not Applicable	Not Applicable														
	iii. Deductible- (It is a specified amount up to which an insurance company will not pay any claim, and which will be deducted from total claim amount (if claim	<table><tr><td>Benefit</td><td>Deductible (in USD)</td></tr><tr><td>Medical Expenses and Medical Evacuation and Repatriation</td><td>100</td></tr><tr><td>Emergency Dental Treatment</td><td>25/ 50/ 100</td></tr><tr><td>Mental & Nervous Disorders</td><td>75/ 100</td></tr><tr><td>Loss of Checked Baggage</td><td>50%</td></tr><tr><td>Delay of Checked Baggage</td><td>12 hours</td></tr><tr><td>Loss of Passport</td><td>20/ 25/ 30/ 50</td></tr></table>	Benefit	Deductible (in USD)	Medical Expenses and Medical Evacuation and Repatriation	100	Emergency Dental Treatment	25/ 50/ 100	Mental & Nervous Disorders	75/ 100	Loss of Checked Baggage	50%	Delay of Checked Baggage	12 hours	Loss of Passport	20/ 25/ 30/ 50	
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	amount is more than the specified amount)	Personal Liability	200/ 500	
	Any other limit (as applicable)	Not Applicable		Not Applicable
9	Claims/ Procedure	<p>Reimbursement of covered expenses up to specified limits. Fixed amount on the occurrence of covered events.</p> <p>Provide the details /web link for following:</p> <p>i. Network hospital details - https://generalicentralinsurance.com/hospital-locator</p> <p>ii. Helpline Number - 1800 209 1016 / 1800-103-8889</p> <p>iii. Hospitals which are blacklisted or from where no claims will be accepted by Insurer. - https://generalicentralinsurance.com/hospital-locator</p> <p>Downloading/getting claim form - https://generalicentralinsurance.com/customer-service/downloads</p>		Section IV
10	Policy Servicing	<p>a) Call Centre number of Insurer Policy Servicing: 1800 220 233/1860 500 3333/ 022-67837800 Timing: 7 am to 10 pm Claims Servicing: 1800 103 8889/1800 209 1016 Timing: 24*7</p> <p>b) Details of company officials Policy Servicing Office: <<As appearing on the Policy Schedule>></p>		
11	Grievances /Complaints	<p>Details of -Grievance Redressal Officer of the Insurer: https://generalicentralinsurance.com/customer-service/grievance-redressal</p> <p>-Insurance Company grievance portal / Department:</p> <ul style="list-style-type: none"> • Helplines: 1800-220-233/ 1860-500-3333/ (022) 67837800 • Email: GCicare@generalicentral.com • Website: https://generalicentralinsurance.com <p>-Ombudsman: The guidelines of taking up a complaint in ombudsman and the addresses of ombudsman are available on: http://www.policyholder.gov.in/Ombudsman.aspx</p>		Grievance Redressal Procedures
12	Things to remember	<ul style="list-style-type: none"> • Free Look Cancellation • Policy Renewal • Migration & Portability • Change in Sum Insured • Moratorium Period 		Not Applicable

1 3	Your Obligations	Please disclose all Pre-Existing Disease/s, or condition/s before buying a policy. Non-disclosure may affect claim settlement.							Section IV (D)	
		Disclosure of other material information during the policy period.								
		Name of the Insured Person/s				Pre-Existing Condition/Deformity				
		Insured 1								
1 4	Benefit Chart									
	Plan Types: (All benefits are in USD)									
	Main Benefit	Sub-Benefit	Basic	Standard	Silver		Gold		Platinum	Asia - Pacific Excluding Japan
	Medical Care	Medical Expenses and Medical Evacuation and Repatriation	50,000	50,000	1,00,000	1,50,000	2,00,000	2,50,000	5,00,000	25,000
		Emergency Dental Treatment	250	250	250	250	500	500	500	100
		Mental & Nervous Disorders	NA	500	500	500	500	500	1000	500
		Maternity Benefit*	NA	500	500	500	1000	1000	2000	500
	Personal Accident	Personal Accident Cover (Accidental Death & Disability)	7500	7500	15000	22500	30000	37500	40000	5000
		Accidental Death - Common Carrier	10000	10000	15000	20000	25000	25000	50000	7000
		Loss of Checked Baggage	1000	1000	1250	1500	1750	2000	3000	750

	Personal Care	Delay of Checked Baggage	50	150	150	150	150	150	150	50
		Compassionate Visit	NA	5000	5000	5000	7500	7500	10000	3000
	Travel Inconvenience	Loss of Passport	200	200	200	200	250	250	300	150
	Personal Liability	Personal Liability	NA	100000	100000	100000	100000	100000	200000	100000
	Special Allowances	Tuition Fee	NA	10000	10000	15000	15000	20000	25000	7000
		Sponsor Protection	NA	10000	10000	10000	10000	10000	15000	7000
		Felonious Assault	NA	5000	5000	5000	5000	5000	10000	3000
		Bail Bond	NA	500	1000	1500	2000	2500	2500	1000
	* Waiting period of 10 months Period of policy would be as per the "Days of Travel" opted for									

Declaration by the Policy Holder:

I have read the above and confirm having noted the details:

Place _____

Date _____ (Signature of the Policy)

Note:

The web-link, where the product related documents including the Customer Information Sheet are available on the website of GCI, is at <https://generalicentralinsurance.com/customer-service/downloads>

In case of any conflict, the terms and conditions mentioned in the policy documents shall prevail.

Your confirmation, being the policyholder, regarding receiving of the Customer Information Sheet is necessary.



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ISO No. GCH/HP/FSU/CIS/001

Student Suraksha: CIS

UIN: GCITIDP21520V022021