



Community Health Worker Program (CHW) Insurance Requirement Health Insurance Verification Form

- Cleveland State University School of Nursing Community Health Worker (CHW) Program values the health and welfare of all students, therefore requires that **each student must carry some form of health insurance for his/her own protection.**
- The CHW Program provides the following link <https://www.healthcare.gov> for information about Affordable Health Care plan options and enrollment.
- Complete this form related to your Health Insurance coverage

CHW Student Name (Last, First, M.I.)	
Policy Holder's Name (if different from the CHW Student)	
Company Name	
Dates of Coverage	
Policy Number	
Group Number	

Return completed health insurance verification form to;
Noelle Muscatello, CE Program Coordinator, CSU School of Nursing
2121 Euclid Avenue. JH 218, Cleveland, OH 44115

or

Email: cenursing@csuohio.edu

Fax: 216/687-3556