

**DU Health & Counseling Center  
Continuous Enrollment  
2014-2015 Health & Counseling Fee Enrollment Form**

Student Information			
<b>Last Name</b>		<b>DU ID #</b>	
<b>First Name</b>		<b>Phone #</b>	
<b>\$158 Each Quarter</b>			
<b>Circle the Current Term</b>			
<i>Students may only enroll in the current term. A new form and payment must be submitted each term.</i>			
	<b>Coverage Dates</b>		<b>Coverage Dates</b>
<b>Fall</b> 201470	September 01, 2014-January 03, 2015	<b>Spring</b> 201530	March 22, 2015-June 13, 2015
<b>Winter</b> 201510	January 04, 2015-March 21, 2015	<b>Summer</b> 201550	June 14, 2015 – August 31, 2015
<input type="checkbox"/> <b>My Graduate Program pays for the premium. Please ask the person in your program who approved the payment to sign this form and enter the award into the Financial Aid System.</b> <b>Budget Officer Name:</b> _____ <b>Extension:</b> _____ <b>Date:</b> _____  <b>Budget Officer Signature:</b> _____			
<b>I have carefully reviewed the DU HCC HCF information (<a href="http://www.du.edu/health-and-counseling-center/coveragecosts/index.html">http://www.du.edu/health-and-counseling-center/coveragecosts/index.html</a>) and elect to enroll as indicated. I understand my coverage period and the services covered by the health &amp; counseling fee.</b>			
<b>Student's Authorization Signature</b>		<b>Date</b>	: / /

Form & payment must be received at:  
The DU Health & Counseling Center / 2240 E Buchtel Blvd / Denver, CO 80208  
Phone 303.871.2205 • Fax 303.871.4242



**UNIVERSITY of  
DENVER**

STUDENT LIFE  
Health & Counseling Center