



Date: August 26, 2025
Insured: Western New England University
Policy Number: GPT 0552815
Policy Period: October 1, 2025 - October 1, 2026

Re: [Named Traveler] – Travel Insurance Certificate
Destination: [City, Country]
Dates of Travel: Date 00, 20XX to Date 00, 20XX]

Provided by: ZURICH AMERICAN INSURANCE COMPANY
1299 Zurich Way
Schaumburg, Illinois 60196

To Whom It May Concern,

Please allow this letter to serve as confirmation that the above named individual is currently covered by above referenced insurance policy while traveling on behalf of Western New England University.

This insurance provides coverage for the following:

- Emergency medical insurance for worldwide travel up to \$500,000 USD for accident and illness. No deductible.
- Medical repatriation and medical evacuation insurance for worldwide travel to \$1,000,000 USD for accident and illness. No deductible.
- Hospital Admission and Medical Expense Guarantee for worldwide travel to \$10,000 USD for accident and illness. No deductible.
- Coverage for return of remains of mortal injury for worldwide travel to \$1,000,000 USD for accident and illness. No deductible.

Please Note: This insurance will provide coverage for diagnosis and treatment of COVID-19 to the same extent as it would for any other medical conditions covered per the terms of this insurance.

Such coverage is provided while traveling worldwide, including travel to [City, Country].

Coverage is provided on a 24-hour basis for the duration of travel, commencing from the time of leaving one's home address until returning back to one's home address at the conclusion of the covered trip.

In the event of any emergency, or need to utilize any of the above benefits, please contact the Zurich Travel Assistance vendor:

World Travel Protection
901 King Street West, Suite 300
Toronto, Ontario M5V 3H5

U.S. and Canada Toll-Free: +1.866.224.0146
Worldwide - Collect: +1.416.645.4682
e-mail: info@wtp.ca

If there are any questions regarding this letter, please contact me directly.

Signed for and on behalf of the Company,

John Talianis

Zurich Accident Solutions
AVP, Senior Underwriter
Phone: 212-553-5558
Email: john.talianis@zurichna.com

This letter is provided for informational purposes only and does not alter or amend the above-referenced insurance policy. The terms and conditions described in this letter are governed by the Policy that contains the complete terms. In the event of any discrepancy between the information in this letter and the Policy, the Policy shall govern.