



nesesse members – proof of full-time studies

Enquiries: 086 0100 678
Fax: 012 336 9537
Email: subscriptions@medihelp.co.za
Postal address: PO Box 26004, ARCADIA, 0007
Website: www.medihelp.co.za

Members of the Necesses benefit option who are studying full-time at a **tertiary institution**, with proof of **full-time registration**, qualify to pay their monthly subscription fees according to a lower income category.

Existing Necesses members who are already registered as full-time students at Medihelp

If you already pay subscriptions according to a lower income category based on your status as full-time student, you must supply proof of your continued full-time studies to Medihelp by no later than **31 March** of every year. Should you fail to do so, your subscription will be adjusted from 1 May according to the **next higher income category** than the category on which you are enrolled.

If you submit proof to Medihelp only after 31 March, your subscription will be adjusted to a lower income category from the month following the month in which Medihelp receives your proof. No retroactive adjustments can be considered.

If you supply no proof, Medihelp will require you to supply proof of your income at the end of the year to determine your applicable subscription.

New enrolments and existing members who have not previously been registered as full-time students at Medihelp

Until Medihelp receives acceptable proof of enrolment as a full-time student, your subscription will be determined according to your gross monthly income. If this information is unknown, your subscriptions will be calculated according to the highest income category.

Medihelp will only adjust your subscription to a lower income category from the month following the month in which we receive proof of your full-time studies. No retroactive adjustments can be considered.

Medihelp accepts any of the following documentation as valid proof of registration as a full-time student

Students younger than 26 years

- A notice from the institution where you are registered as a full-time student for the current year, on the institution's official letterhead.
- New students who register for the first time: An official letter of acceptance as a student for the specific study year.

Medihelp can only consider your request to pay subscriptions according to a lower income category once we receive the required documentary proof of full-time studies.

Students 26 years and older OR who have registered dependants

- Proof of studies as indicated above.
- Minimum requirement for proof of income is three month's bank statements.

Medihelp can only consider your request to pay subscriptions according to a lower income category once we receive the required documentary proof and a duly completed and signed "**Proof of Income Declaration**" form (also included). **Please indicate at section 2 that you are a full-time student.**

Email the documents to subscriptions@medihelp.co.za or fax it to **012 336 9537**. You can also make use of Medihelp's secured website to declare your income/status as a full-time student and submit supporting documentation.

proof of income declaration

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Instructions:

1. Please complete sections 1 and 2 in black ink and sign the form.
2. **Consult the "Explanation of Income" form for details of acceptable proof of income.**
3. Attach the required proof and return the documents with this form to Medihelp.
4. Full-time students need only complete this form if they are 26 years or older OR have registered dependants. **Please indicate at section 2 that you are a full-time student.**

1. membership details

Member No	<input type="text"/>	ID/passport No	<input type="text"/>
Title	<input type="text"/> Mr <input type="text"/> Mrs <input type="text"/> Ms <input type="text"/> Other (specify)	Initials	<input type="text"/>
Contact details:	Telephone No <input type="text"/>	Surname	<input type="text"/>
		Email address	<input type="text"/>

2. declaration of income

"**Monthly income**" means the gross monthly income before any deductions.

If you do not earn an income, please indicate below at "Occupation" that you **do not earn an income**.

Occupation	Member	
	Spouse/partner	
Source of income	Average monthly income	
	Member	Spouse/partner
Income from full-time employment (salary etc.)		
Pension(s) /Annuity(ies)		
Income from vocation/profession/business		
Unemployed (e.g. UIF payments)		
Income from investment (rental income, interest, dividends)		
Income from trusts		
Other: _____		
TOTAL		

Please remember:

- Your application to pay the subscriptions for a lower income category can only be considered on receipt of a **duly completed and signed declaration form** with the relevant proof.
- The Rules of Medihelp stipulate that committing a fraudulent act, such as providing false information about your actual income, may result in the termination of your membership.

I confirm that I have declared all my income and that the information is true and accurate.

 Member's signature

 Date

Customer Care: 086 0100 678 | www.medihelp.co.za

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