

GIZ INTERNATIONAL GROUP HEALTH INSURANCE**Status request – CIM**

Dear CIM employee,

thank you for your interest in taking out International Health Insurance within the GIZ group contract. Within the scope of this group contract with Hallesche Health Insurance a.G. there is one tariff available for you, the **full Insurance**.

In order to answer your request as quickly and effectively as possible, please answer the following:

1.1 Main insured person (GIM employee)				
Surname	First Name	Country of Assignment	Binding Travel Date	Start of Current Expat Contract

1.2 Persons to be co-insured (MAP)			
Surname	First Name	Country of Assignment	Binding Travel Date

1.3 Country - previous insurance (of all insured persons)		
Surname	First Name	Current Health Insurance / Country

Please have GIZ (hr-s_auslandskrankenversicherung@giz.de) confirm that all information provided on the form is correct and complete. In particular, the indicated accompanying partners (MAP) are to be recognized as such by CIM.

Date, Signature Team International Health Insurance GIZ

Please upload the completed and signed form on the online platform.

If you opt for the manual registration process, please send this form by e-mail to giz@dr-walter.com and put GIZ (hr-s_auslandskrankenversicherung@giz.de) in CC.