**VACCINATION CERTIFICATE TU Delft**

Students that have arranged to go abroad for study or internship in a country where vaccinations are compulsory

or strongly advised, can be vaccinated with reduction by the SGZ (Student Healthcare). The student will get a

reduction of €50,- on the costs of vaccinations. Some insurance companies reimburse the remaining costs,

depending on the insurance policy.

If you want to be eligible for this reduction on vaccinations by the SGZ you have to fill out this form, have an

authorized person in your faculty sign it (signature and stamp) and sign it yourself. On www.buitenland.tudelft.nl

you find at 'Step 2 Making preparations/arrangements', under 'Vaccinations' an overview of the authorized

persons per faculty.

Subsequently you can make an appointment with the SGZ. It is best to make the appointment as soon as the

internship is arranged. You can make the appointment by telephone (015-2121507) or internet

(www.sgzopreis.nl). The address of the SGZ is: **Gezondheidscentrum de Hoed, Kampveld 10A, Delft**

You are expected to bring this form to the appointment as well as information about earlier administered

vaccinations (vaccination booklet).

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| --- | --- |
| STUDENT INFORMATION (to be filled out by student) | |
| Name |  |
| Date of birth |  |
| Student number |  |
| Address, postal  code and country |  |
| Telephone number |  |
| E-mail address |  |

|  |  |
| --- | --- |
| TRAVEL INFORMATION (to be filled out by student) | |
| Destination  Length of stay | Country:  City:  Departure: Return: |
| Aim of the journey | O Study O Study trip O Internship |
| Coordinator | Name:  Telephone number:  E-mail address: |

Filled in truthfully:

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| FACULTY INFORMATION (to be filled out by an authorized functionary) | |
| Faculty |  |
| Name |  |

States that the trip, described on the frontside of the page, is study related.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Stamp faculty: \_\_\_\_\_\_\_\_\_\_\_