



OSHC REQUEST FORM

PERSONAL DETAILS		
Griffith Student number:	Family name:	Contact number:
	First name:	
	Other names:	
		Email:

<input type="checkbox"/> UPGRADE/EXTEND VISA LENGTH COVER		VISA EXPIRY DATE: ___/___/___
Government visa regulations require students to have Visa Length Health Cover when applying for or extending their student visa. To request Visa Length Health Cover or to change your policy, please complete the following information. An OSHC Allianz Care Australia representative can assist you to calculate the number of months and premium required. For details of the locations and times that the Allianz Care Australia representatives are available, check OSHC on-campus support .		
Current Overseas Student Health Cover details:		
Policy number: _____	Single <input type="checkbox"/>	Dual Family <input type="checkbox"/> Multi-Family <input type="checkbox"/>
Details of Visa Length Cover required:		
*Refer to page 2 for insured groups		
Start Date: ___/___/___	End Date: ___/___/___	Number of months required: _____
Premium \$ _____	Please pay the premium amount via your student account so cover can be provided.	

<input type="checkbox"/> EXEMPTION FROM VISA LENGTH COVER
If you have engaged another provider for the length of your visa or are no longer on a student visa, you may be exempt from this ongoing Overseas Student Health Cover fee.
You must provide documentary evidence including your policy certificate / policy documents or your alternate visa with this form.
<input type="checkbox"/> I have engaged Health Cover with another OSHC provider. (Please attach policy from other provider)
Name of Alternative Provider: _____ Start Date: ___/___/___
Level of Cover: _____ End Date: ___/___/___
<input type="checkbox"/> I am no longer a holder of a student visa. Please attach a copy of your current alternate visa.





STUDENT DECLARATION
I certify that the above information is correct and that all necessary documentation will be attached.
Signature: _____ Date: ___/___/___

LODGING INSTRUCTIONS
Please submit this form to the International Office via intl-oshc@griffith.edu.au or via Ask Us.
To submit via Ask Us select Ask a question > Subject: OSHC Request Form > Question: OSHC Upgrade / Exemption > Upload your form and supporting documentation > Select a topic - 'International' - 'Overseas Student Health Cover' > Submit
Any additional Visa Length Cover premium will be charged to your student account. Please pay via your student account as soon as you receive your premium charge. Your cover will not be scheduled until payment has been made. Questions about this form can be emailed to intl-oshc@griffith.edu.au .
Griffith University collects, stores and uses personal information only for the purposes of administering student and prospective student admissions, enrolment and education. The information collected is confidential and will not be disclosed to third parties without your consent, except to meet government, legal or other regulatory authority requirements. For further information consult the University's Privacy Plan .

OSHC VISA LENGTH COVER RATES 2026

Duration	Single	Dual	Multi	Duration	Single	Dual	Multi
1	\$77	\$503	\$893	37	\$2,720	\$16,475	\$29,451
2	\$151	\$1,002	\$1,778	38	\$2,832	\$17,082	\$30,534
3	\$227	\$1,501	\$2,669	39	\$2,945	\$17,689	\$31,617
4	\$304	\$2,002	\$3,559	40	\$3,058	\$18,295	\$32,702
5	\$379	\$2,502	\$4,451	41	\$3,171	\$18,901	\$33,787
6	\$454	\$3,004	\$5,341	42	\$3,283	\$19,508	\$34,872
7	\$517	\$3,425	\$6,084	43	\$3,398	\$20,114	\$35,952
8	\$583	\$3,841	\$6,830	44	\$3,510	\$20,722	\$37,038
9	\$646	\$4,260	\$7,577	45	\$3,623	\$21,329	\$38,123
10	\$711	\$4,680	\$8,317	46	\$3,736	\$21,934	\$39,207
11	\$773	\$5,100	\$9,064	47	\$3,849	\$22,541	\$40,291
12	\$838	\$5,516	\$9,809	48	\$3,961	\$23,147	\$41,373
13	\$913	\$5,956	\$10,607	49	\$4,042	\$23,729	\$42,387
14	\$987	\$6,400	\$11,410	50	\$4,126	\$24,310	\$43,398
15	\$1,062	\$6,842	\$12,209	51	\$4,208	\$24,892	\$44,409
16	\$1,138	\$7,282	\$13,012	52	\$4,290	\$25,475	\$45,421
17	\$1,213	\$7,728	\$13,807	53	\$4,372	\$26,057	\$46,431
18	\$1,286	\$8,173	\$14,608	54	\$4,455	\$26,639	\$47,444
19	\$1,361	\$8,612	\$15,409	55	\$4,538	\$27,218	\$48,456
20	\$1,437	\$9,058	\$16,212	56	\$4,621	\$27,800	\$49,468
21	\$1,511	\$9,499	\$17,010	57	\$4,702	\$28,382	\$50,478
22	\$1,586	\$9,942	\$17,810	58	\$4,783	\$28,966	\$51,490
23	\$1,662	\$10,382	\$18,611	59	\$4,866	\$29,548	\$52,503
24	\$1,735	\$10,828	\$19,270	60	\$4,948	\$30,128	\$53,514
25	\$1,810	\$11,254	\$20,028	61	\$5,051	\$30,754	\$54,628
26	\$1,880	\$11,681	\$20,786	62	\$5,155	\$31,381	\$55,744
27	\$1,953	\$12,109	\$21,544	63	\$5,258	\$32,004	\$56,858
28	\$2,026	\$12,535	\$22,303	64	\$5,362	\$32,629	\$57,974
29	\$2,099	\$12,962	\$23,060	65	\$5,464	\$33,254	\$59,090
30	\$2,169	\$13,388	\$23,817	66	\$5,567	\$33,880	\$60,205
31	\$2,244	\$13,802	\$24,577	67	\$5,671	\$34,504	\$61,318
32	\$2,316	\$14,216	\$25,333	68	\$5,773	\$35,130	\$62,433
33	\$2,388	\$14,628	\$26,092	69	\$5,877	\$35,754	\$63,549
34	\$2,462	\$15,042	\$26,851	70	\$5,981	\$36,380	\$64,665
35	\$2,533	\$15,455	\$27,608	71	\$6,084	\$37,007	\$65,780
36	\$2,605	\$15,869	\$28,367	72	\$6,187	\$37,628	\$66,894

Insured groups

Single	Dual family	Multi family
	 or 	

Your OSHC policy will be arranged with **OSHC Allianz Care Australia**
 Please visit [Allianz Care](#) for policy details and to order your new OSHC card.