

Endorsement	New Classes
Effective Date:	10/11/2011
Policy Number:	6400-21-89
Policyholder:	University of Rochester
Policy Period:	6/11/2010 to 7/1/2015
Name of Company:	Federal Insurance Company
Issue Date:	10/12/2012

It is agreed that the Policy is amended as follows:

In consideration of a pro rata additional premium of \$21,540, the following **Classes** are added to **Section I** - **Insured Persons** of the Schedule of Benefits.

Class	Description			
10	All in-bound International Students (inclusive of	undergraduate and graduate), J-1 Visa		
	Scholars (inclusive of Professors, Research Schola	ars, short-term Scholars and Student		
	Interns) and H-1B Visa Scholars (inclusive of Pro-	fessors, Research Scholars, short-term		
	Scholars and Student Interns) of the Policyholder			
11	Spouse or Domestic Partner and Dependent Chil	dren of a Class 10 Primary Insured		
	Person.			
The following <b>Hazards</b> apply:				
Class	Hazard			
10	24 Hour Business and Pleasu	ıre		
11	24 Hour Business and Pleasu	are		
Section IV of the Schedule of Benefits is amended to include the following:				
Class	Hazard Principa	al Sum		

Class	Hazard	Principal Sum
10	24 Hour Business and Pleasure	\$15,000
11	24 Hour Business and Pleasure	\$ 5,000

A) Solely with respect to the insurance provided by this endorsement, Section IV – Benefits of the Schedule of Benefits of the Contract is amended to include the following:

**Medical Evacuation and Repatriation** 

Class 10

Maximum Benefit Amount Unlimited

Class 11

Maximum Benefit Amount Unlimited

This **Benefit Amount** is not subject to Section IV - Maximum Payment for Multiple Losses and Multiple Benefits, of the Contract.

**Psychological Therapy** 

Class 10

Benefit Amount 10% of the Principal Sum up to a maximum of \$5,000

## Class 11

Benefit Amount 10% of the Principal Sum up to a maximum of \$5,000

This **Benefit Amount** is not subject to Section IV - Maximum Payment for Multiple Losses and Multiple Benefits, of the Contract.

## **Rehabilitation Expense**

Class 10

Benefit Amount 5% of the Principal Sum up to a maximum of \$5,000

Class 11

Benefit Amount 5% of the Principal Sum up to a maximum of \$5,000

This **Benefit Amount** is not subject to Section IV - Maximum Payment for Multiple Losses and Multiple Benefits, of the Contract.

## Seat Belt and Occupant Protection Device

Class 10

**Benefit Amount for Seat Belt** 10% of the **Principal Sum** Alternate Benefit Amount \$2,000 Benefit Amount for Occupant Protection Device 10% of the **Principal Sum** Maximum Benefit Amount for Seat Belt and Occupant Protection Device 20% of the **Principal** Sum to a maximum of \$50,000

## Class 11

**Benefit Amount for Seat Belt** 10% of the **Principal Sum** Alternate Benefit Amount \$2,000 Benefit Amount for Occupant Protection Device 10% of the Principal Sum Maximum Benefit Amount for Seat Belt and Occupant Protection Device 20% of the Principal Sum to a maximum of \$50,000

This **Benefit Amount** is not subject to Section IV - Maximum Payment for Multiple Losses and Multiple Benefits, of the Contract.

**Medical Evacuation and Repatriation** shown in **Section I – Insurance** of the Contract is amended as follows for **Classes 10** and **11** only.

The following is deleted in its entirety.

This insurance applies only if the trip: 1) is more than 100 miles from the **Insured Person's** primary residence; and

2) lasts no more than 365 consecutive days.

All other terms and conditions of the policy remain unchanged.

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Authorized Representative