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Université d'Ottawa | University of Ottawa

Faculté de droit | Faculty of Law
Section de common law | Common Law Section

UNIVERSITY OF OTTAWA, FACULTY OF LAW
STUDENT-PROPOSED INTERNSHIP
EMERGENCY INFORMATION

Student name: _____

Student number: _____

Date: _____

Insurance coverage

Provider: _____

Policy number: _____

Please attach a copy of the policy.

Date of departure: _____

Date of return: _____

Emergency contacts

Name: _____

Relationship: _____

Home phone: _____

Work phone: _____

Cell phone: _____

E-mail: _____

Name: _____

Relationship: _____

Home phone: _____

Work phone: _____

Cell phone: _____

E-mail: _____