

Los Angeles County Fire Fighters  
**Local 1014 Health and Welfare Plan**  
3460 Fletcher Avenue • El Monte, California 91731  
(310) 639-1014  
(800) 660-1014 (inside California)

## Student Verification Form

Member Name: \_\_\_\_\_ ID Number: **XDHFF109**\_\_\_\_\_

Dependent Student's Name: \_\_\_\_\_ Date of Birth \_\_/\_\_/\_\_\_\_\_

### Dependent Student's Authorization:

I authorize \_\_\_\_\_ to release information regarding my enrollment status,  
(Name of school, college or university)  
dates of enrollment, number of classes taken, and number of units attempted to the Los Angeles County  
Fire Fighters Local 1014 Health and Welfare Plan for the purpose of verifying my status as an eligible  
dependent.

\_\_\_\_\_  
Dependent Student's Signature

\_\_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Date

### Verification by School, College or University:

Please complete the following information or attach an individually identifiable print-out of the requested information:

Name of School, College, or University: \_\_\_\_\_

What number of units constitutes full time status at your school, college or university? \_\_\_\_\_

Date term began and ended				
Number of units attempted				

\_\_\_\_\_  
Signature of School Representative

\_\_\_\_\_  
Title

\_\_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Date

### Michelle's' Law:

Benefits for eligible dependents who are full-time students at a postsecondary educational institution may be continued for up to one year while the student is on a medically necessary leave of absence from school if the leave of absence commences while the dependent student is suffering from a serious illness or injury, is medically necessary, and would otherwise cause the student to lose student status under the "Continuing Coverage for Dependents Who Are Full-Time Student" section of the Local 1014 Summary Plan Description.

If you believe that the student referred to above would qualify for continued coverage under Michelle's Law, please contact Local 1014 Member Services at 800-660-1014