



CERTIFICATE OF CURRENCY

DATE: 31 March 2008

POLICY NUMBER: 93102598

POLICY HOLDER: University of New England

INSURED PERSONS: The insurance proved under this policy shall only apply whilst an **Insured Person** is engaged in a work experience program that is authorised and under the control of the **Policyholder**. The coverage shall also extend to include direct travel to and from the location of the work experience programme.

PERIOD OF INSURANCE: From 4pm 16th day of April, 2008
To 4pm 16th day of April, 2009

COVERAGE SECTION / SUMS INSURED EACH INSURED PERSON

Coverage Sections 1 to 9 As Per Policy Schedule of Sums Insured

AGGREGATE LIMITS OF LIABILITY:

| | | |
|----------------------|------------------------------------|-------------|
| (a) Personal Injury: | (i) Any one Accident or Occurrence | \$2,500,000 |
| | (ii) Non Scheduled Air Travel | \$1,000,000 |

DEDUCTIBLE AMOUNTS:

| | |
|--|-----------------|
| Coverage Section 2 (i) Weekly Benefits | 7 Days |
| Coverage Section 2 (ii) Domestic Help/Child Minding Services | 7 Days |
| Coverage Section 3 Bed Care Patient | 7 Days |
| Coverage Section 4 Medical Expenses – Non Medicare | \$100 per claim |
| All Other Coverage Sections | Nil |