# DukeHub

## **Forms and Requests**

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# Health Insurance

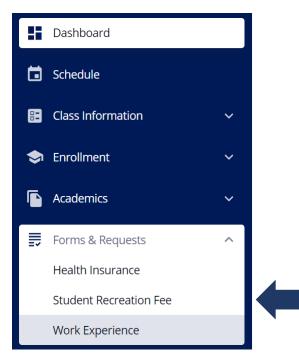
All students are required to carry health insurance. You can select either Duke provide health insurance or provide proof of your own coverage.

Health Insurance					
Insuranc	e Coverage				
Cove	rage Period: Academic Year 2021 (Full Academic Year)				
١	All students are required to maintain adequate medical insurance during their enrollment at Duke University. You must complete the insurance steps on the next page.				
	Please complete the steps on the following page prior to September 15, otherwise you(r):				
	<ul> <li>Will be automatically enrolled in the Student Medical Insurance Plan (SMIP) for the period from August 1 of this year to July 31 of next year.</li> <li>Insurance charge will remain on your Bursar account.</li> <li>Will receive your enrollment information and card AFTER September 15.</li> </ul>				
	For details on plan benefits or the cost of coverage, visit the <u>Student Health Website</u> . Answers to frequently asked questions may be found at <u>SMIP FAQs</u> .				
	Please click the "Next" button below to continue.				
	Next				

surano	e Coverage	
Cove	rage Period: Academic Year 2021 (Full Academic Year)	
1	Please choose one of the following options by clicking the appropriate push button below:	
	<ul> <li>ENROLL If you decide to enroll in SMIP instead of utilizing your current insurance.</li> <li>WAIVE If you decide to waive insurance you will need to complete the "My Current Insurance Plan or Policy" in the next step.</li> </ul>	
	For questions and information on Duke Student Health Insurance, visit <u>SMIP FAQs</u> . If you answer is not found, you may email insurance@studentalfairs.duke.edu or <u>click here.</u>	
	Please click one of the buttons below to continue.	
	[Msg Set 29700, Nbr 48]	

## **Student Recreational Fee**

If Graduate PhD Students after their 5th year at Duke want to access the gym, they must use the process below to opt in. This will add the gym membership charge to their Bursar account.

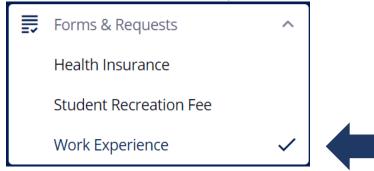


Select either Yes or No to have the Gym Fee appear on your bill. Then click Submit.

	Recreation Fee	
00	duate student, you will need to indi t to pay the Optional Student Recrea hown below.	
	pay the fee if you want access to ies on campus. The fee for the term	ı
	he fee is not pro-rated, and once yo	u elect
Please note that t	he fee is not pro-rated, and once yo charge is non-refundable.	u elect
Please note that t	he fee is not pro-rated, and once yo charge is non-refundable.	
Please note that t to pay the fee the	he fee is not pro-rated, and once yo charge is non-refundable. Yes, I want to pay for the Recreational Fee.	

### **Work Experience**

In certain circumstances, your school might ask students to complete a Work History. If you are instructed to do so, click the Work Experience link.



## Click the Add New Job button.

Work Experience
Below is your <b>Work Experience History</b> . Please add an End Date to your current position prior to adding a New Job.
No current work experience information found.
⊕ Add New Job

# Complete your Employment Details, and then click Save.

Work Experience	
Work Experience for Janet D Terry	
Employment Details ()	
Employer *	Start Date *  mm/dd/yyyy
Job Tilte *	End Date mm/dd/yyyy
Work Address (Country/City/State)	Phone Contact
Country City State Q	Phone Type
Cancel Save	