PATIENT PROTECTION AND AFFORDABLE CARE ACT/ HEALTH INSURANCE MARKETPLACE ACKNOWLEDGMENT FORM

Student Name:	Student ID:
The Patient Protection and Affordable Care Act (Accreated a Health Insurance Marketplace where yo compare plans, and see if you are eligible for Med Insurance Resources Fact Sheet to answer many o Insurance Marketplace.	u can learn about health insurance options, licaid. Job Corps has created a Health
By signing this form, you acknowledge the following	ng:
 Health and Wellness staff discussed the AC Health and Wellness staff discussed your h You received the Job Corps Health Insurance Job Corps Health and Wellness staff is avairable 	ealth insurance options ce Resources Fact Sheet
Health and Wellness Staff Signature/Position	Date
Student Signature	Date