



SISC III
SELF-INSURED SCHOOLS OF CALIFORNIA

: cf 8]ghf]Wni gYCb'm
; fci d'Bi a VYf
9Z'8 UHY

89 @15 '89BH5 @U -G-CB'G9FJ=79'D@B'89G= B5H-CB': CFA

%'8 -GHF=7H'B5A9. McgYa]h'7 ca a i b]mi7 c`Y[Y8]gh]Wi 8 -GHF=7H'-8` .

&'D9FGCB5 @-B: CFA5H-CB.

; YbXYf.
[] Male
[] Female
GhU g.
[] Single
[] Married

B5A9.
@gh : fgh MI

GfYh5 XXfYgg 7]hm GHU Njd D\ cbY ()

GcVU'GYW f]mBi a VYf 6]fA XUHY Classification:
[] Certificated [] Classified [] Management [] Board Member

' "G@7H7CJ9F5; 9.

***O**Q89@15'DF9A=9F' =B79BH=J9'D@B'!'bWi XYg'CfH cXcbh]WwEj YfU] Y
Coverage begins at 70% and increases to 100%
Increase in coverage occurs every calendar year plan is utilized by each covered member

.....89@15'DDC'fB DCL'D@B'!'9I Wi XYg'CfH cXcbh]WwEj YfU] Y
Coverage begins at 100%
By choosing the PPO/DPO Plan I understand that I am responsible for a greater portion of my dental costs when I use a non-preferred provider. I realize that I cannot change to the Delta Traditional Incentive Plan until a subsequent Open Enrollment period generally held in September with an October 1 effective date. I also understand that if I choose to change to the Incentive Plan during an Open Enrollment, my benefits will start at 70%.

***O**Q'J-G-CB'G9FJ=79'D@B

(' "G= B5H F9.

Subscriber's Signature

Date