

Sober College Environments
6233 Variel Ave
Woodland Hills, CA 91367



Admissions: 800.465.0142
Confidential Fax: 818.301.1935
Email: admissions@sobercollege.com

Insurance Verification Form

Client Full Legal Name	Client DOB
<input type="text"/>	<input type="text"/>

Client Drivers License or State ID Number	Client Current Address
<input type="text"/>	<input type="text"/>

Client SSN	Client Insurance Member ID	Client Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>

Insurance Provider Name and Telephone Number
<input type="text"/>

Form Completed For (Facility Name)	Facility Phone
Sober College	(818) 274 - 0304

Primary Subscriber Full Legal Name	Primary Subscriber DOB	Primary Subscriber SSN
<input type="text"/>	<input type="text"/>	<input type="text"/>

Primary Subscriber Drivers License or State ID Number	Primary Subscriber Insurance Member ID
<input type="text"/>	<input type="text"/>

Primary Subscriber Current Address	Primary Subscriber Phone
<input type="text"/>	<input type="text"/>

Name of Person Completing Form	Phone of Person Completing Form
<input type="text"/>	<input type="text"/>

Please save this PDF after you've filled it out and email it to admissions@sobercollege.com.

To save you must go up to "file" in the menu bar and click "save as" and save it to your desktop and then you can open an email client and attach the PDF in the email. Or you can send within the PDF by selecting "file" and then "attach to email".