GLENDALE COMMUNITY COLLEGE DISTRICT

Supplemental Life Insurance Enrollment Form

HARTFORD LIFE AND ACCIDENT INSURANCE COMPANY

****	Name): 					Socia	ıl Secı	urity #	:				
	Title								f Birth					
Da	ate of Hire						Ef	fective	e Date	:				
	Salary	<u>': </u>												
IIIU Y CICCL		3 01 310.01	crease yo	our Basic	Life Ins	urance co	i elect an a	enroli	ing in t	he Sup	plement		.	e plan. You a mount o
effective.	If you are E vidence o	e electing of of Insurab	coverage oility for	more to the full a	han 31 d amount d	days from	is satisfac m the dat ge.	tory to e you	Hartfo were f	ord Life f irst eli	before t i gible t e			
OSE LITE TO	ite chart ar	iu calculati	on line b	elow to	aetermin	e your M	onthly (12) cost (for this	covera	ge.*			
				30-34 \$0.09	35-39 \$0.11	40-44 \$0.15	45-49 \$0.22	50-5 \$0.3		5-59 0.68	60-64 \$0.83	65-69 \$01.2		.96
☐ I elect	to enroll i	n the Supp	olementa	ıl Life pla	n at the	Monthly	(12) cost t	elow *	k				-	
\$							x _:				_ +			
Ele	cted Benef	t Amount		,-,	<u></u>		^	Rai	te Abov	/e	- 3	Your Mon	thly(12	?) Cost*
☐ I elect	to decline	the Suppl	emental	Life plan	1.								• •	•
*Your cost	may change	on the plai	n anniver	sary if yo	ur age ca	tegory cho	unges withii	the be	enefits p	lan year	r.			
If you ele may be ma Spouse cos need to pro electing co Insurabili	st'is based ovide evide verage mo ity for the i	on employ nce of goo re than 3	il Life pl 5,000 to ee age. id health 1 days f	lan for you a maxing that is so irom the rage.	ourself, mum of s lect an a satisfacto date ye	you may \$50,000 I mount the ry to Har ou were	at exceeds tford Life t first eligi	plement except the great performance to be	ntal Life eed 50 uarant the exc do so,	e covera % of to eed issuess can you m	age for the appropriate appropriate becomes tust als	roved er ount \$2! e effectiv o provid	nploye 5,000, /e. If le Evid	e election you will
	Rate	\$0.09	\$0.11	30-3 \$0.1			-44 45 .20 \$0.		50-54	55-5			55+	
	·								\$0.56	\$0.9		.58 \$3	2.84	
☐ I elect t	to enroli n	y Spouse	in the Su	ıppleme	ntal Life _l	plan at th	e pay peri	od cost	t indica	ted bek	ow.			,
\$			÷ \$	1,000 =	\$		x \$				= \$			
Elec	ted Benefit	Amount						Rate	e Above	•	Yo	our Month	nly (12)	Cost*
l elect to							hanges wil	hin the	e benef	its plan	year.			
SP	OUSE:		•											
	First Nan	ne		La	st Nam	е	Gen	der	Date	of Marr	iage	Da	te of E	lirth
													<u> </u>	
			L			 -		L				<u> </u>		

	Iculation line below to	determine vour Mont	hly (12) cost for th	is coverage			
				_			
☐ I elect	to enroll my Depender						
# of	Children X Electe	\$2,000 ed Benefit Amount	÷ \$1,000 =	x	\$1.00 Rate	= <u>\$</u> Your	Monthly (12) Cost
☐ I elect	to decline the Supplen	nental Life plan for n	ny Dependent Child	l(ren).			
		•	•				
C	illD: First Name		at Name			5.1. 6.5	
	First Name	La	st Name	Gend	er	Date of E	irth
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L						··········	
		Rono	ficiary Doc	ianstion			
It is import	ant that your boneficia		ficiary Des				
it is import that you na	ant that your beneficiar me a primary and cont	ry designation be cie ingent heneficiary	ar so that there wi When naming your	l be no questi	on as to your m	eaning. It is	also importa
social secu	ity number, relationshi	p, date of birth and	distribution percent	age. If the b	eneficiary is not	related eithe	er by blood o
marriage, i	nsert the words, "Not R	delated" next to their	stated relationship	 If you need 	assistance, con	tact your be	nefits
administrai			oracoa i ciadonomi				
	or or your own legal co	unsel. Following are	e examples of the r	nost common	designations:	·	
<u>Prima</u>		unsel. Following are	e examples of the r	nost common	designations:	·	
<u>Prima</u>		ounsel. Following are <u>C</u>	e examples of the r contingent: Joseph W. Doe,	nost common	designations:	-	
<u>Prima</u>	r y :	ounsel. Following are <u>C</u>	e examples of the r contingent: Joseph W. Doe, (50%).	nost common Son and Jane	designations:	-	
Prima • N	ry: lary J. Doe, Wife (not N	ounsel. Following are Control Control	e examples of the r contingent: Joseph W. Doe, (50%). Estate of the In	nost common Son and Jane sured.	designations: Doe, Daughter,	in equal sha	ares
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