Trustmark Life Insurance Company of New York

Administrative Office PO Box 7962 Lake Forest IL 60045-7962 Phone:866-949-6036 • Fax: 847-615-3132Email:TrustmarkNY@trustmarkinsurance.comWebsite:http://www.trustmarkinsurance.com/customersolutionsny

Education and Training Evaluation

We need your assistance to better understand your claim situation. Please provide the following information concerning your education, prior occupations, hobbies, special skills, and interest in future employment.

EDUCATION: What is the level of your education?

How many years of grade school, high school, college, etc.?

Describe courses taken (commercial, vocational, academic, etc.) Any trade schools, military training schools, or other special training? If so, describe:

PRIOR OCCUPATIONS: List and give details of all previous occupations. Including all duties of each occupation and beginning and ending dates of employment:

SPECIAL SKILLS AND ABILITIES: Identify equipment, tools and machinery that you have used or operated in the past:

HOBBIES: Do you have any hobbies and/or other special interests (woodworking, mechanical repairs, painting, etc.)? If so, describe in detail:

OCCUPATIONAL INTERESTS: Would some other employment interest you based on your past experience, hobbies, special training, etc.? If so, give details:

Trustmark Life Insurance Company of New York, Albany, New York **RESUMING WORK:** Have you tried to resume any type of work since your disability began? If so, give details including names and addresses of employers and the dates and duties with each employer:

VOCATIONAL REHABILITATION: Have you contacted your state Division of Vocational Rehabilitation?

If yes, what is the name and address of the rehabilitation counselor in charge of your case?

What vocational plans have been made with this counselor?

Are you participationg in a rehabilitation program sponsored by your employer, another insurer or any other program?

If yes, give details of the program:

Signature of Insured

Policy Number

Date

Printed Name of Insured

If you have not applied to your state Division of Vocational Rehabilitation please consider doing so. The Vocational Rehabilitation Office will usually be listed under the state agency listings in your telephone book. Evaluation, vocational training and placement services are available to you through a state Vocational Rehabilitation Program at no cost to you.

Please return completed form within 7 days.

Trustmark Life Insurance Company of New York, Albany, New York