UNIVERSITY OF DAYTON
OFFICE OF HUMAN RESOURCES
WAIVER OF ENTITLEMENT TO GROUP TERM LIFE INSURANCE
IN EXCESS OF $50,000

NAME:___________________________________

UNIVERSITY ID #_________________________

The undersigned insured employee is eligible for group term life insurance coverage under the
terms of the group policy issued by Unum to the University of Dayton.

The undersigned insured employee, for good and sufficient reasons, wishes to waive entitlement
to any amount of group term life insurance in excess of $50,000.00.

Therefore, Unum and the University of Dayton agree that no amount of group term life insurance
shall be in force in excess of $50,000.00 until such time as the undersigned insured employee
makes written request for reinstatement of benefits in accordance with and subject to the
provisions of the group policy.

The undersigned insured employee understands that this written request for reinstatement may be
made only one time each year during the month of December with an effective date of January
first of the following year and that evidence of insurability will be required to reinstate the
coverage.

In Witness Whereof the undersigned parties acknowledge their consent and agreement by
affixing their signatures hereto on the date shown.

By:_____________________________________    _____________
    Insured Employee’s Signature          Date

By:_____________________________________    _____________
    Human Resource Signature             Date

Revised 12/19/16

Benefit Form #7