RE: Important Life Insurance Enrollment Period: Optional/Supplemental Life Insurance

The Division of Human Resources is pleased to announce a special one-time Supplemental Life Insurance Open Enrollment presented by Sun Life.

Soon you will receive a mailing from the Wayne State University Division of Human Resources at your home address, offering you the opportunity to increase your current level of supplemental life insurance. This is a special onetime (increase coverage without the required Evidence of Insurability) opportunity which will take place March 28, 2016 through April 8, 2016.

What is supplemental life insurance? It is additional life insurance you may purchase to safeguard your family. Wayne State University provides basic life insurance for eligible employees at no cost. However, depending on the needs of your family you may need additional coverage.

If you do not currently have supplemental life insurance or would like to increase your current coverage by one additional level of coverage this is the time. You can elect to increase your life insurance coverage or add your spouse and/or your dependent (under age 26 dependent child) without the required Evidence of Insurability, only during this special enrollment time. You must complete and submit the required forms within the specified timeframe to qualify for the election change.

Life Insurance Representatives will be on campus to assist and provide guidance to you at the locations and times below. The sessions below will cover life insurance, online will preparation, identity theft and emergency travel assistance.

To learn more about these important benefits, Register at Academica, Employee Resources/Other Resources (Select Training, Seminars, Workshops) to attend one of the benefits meetings listed below:

Tuesday March 29th
12:00 PM at Purdy Kresge Library Auditorium
2:00 PM at Scott Hall, Room 1328

Wednesday March 30th
12:00 PM at Scott Hall, Room 1328
2:00 PM at Purdy Kresge Library Auditorium

All forms are due to Total Compensation and Wellness in 3638 Academic/Administration Building (AAB) on or before Friday April 8th, 2016.

If you have any question, contact us at ASKHR@wayne.edu

Total Compensation and Wellness
Division of Human Resources
2016 Supplemental Life Insurance Special Enrollment
Election Form
Enrollment Period March 28 - April 8, 2016
Coverage Effective May 1, 2016

EMPLOYEE INFORMATION

<table>
<thead>
<tr>
<th>Name</th>
<th>Banner ID</th>
</tr>
</thead>
</table>

EMPLOYEE LIFE/AD&D COVERAGE – ENROLLMENT INFORMATION

Current Supplemental (Additional) / Dependent Life Insurance Coverage Information:

Your current Supplemental Life/AD&D coverage election is: _________________________________

Your current Dependent coverage election is: ___________________________________________

You may only increase one additional level without submitting Evidence of Insurability. Please indicate your new election below:

- [ ] 1x annual salary – Supplemental Life/AD&D
- [ ] 2x annual salary – Supplemental Life/AD&D
- [ ] 3x annual salary – Supplemental Life/AD&D
- [ ] 4x annual salary – Supplemental Life/AD&D

Rates and a calculation example for the Employee Supplemental Life/AD&D coverage are on the back of this form.

DEPENDENT LIFE COVERAGE – ENROLLMENT INFORMATION

<table>
<thead>
<tr>
<th>REQUESTED AMOUNT</th>
<th>12-MONTH EMPLOYEE COST PER PAY</th>
<th>9-MONTH EMPLOYEE COST PER PAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not electing dependent coverage</td>
<td>$ 0.00</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>Family: $20,000 Spouse/Other Eligible Person and $10,000 Per Child (Other Eligible Person eligibility as determined by WSU)</td>
<td>$ 2.25</td>
<td>$ 3.00</td>
</tr>
<tr>
<td>Spouse/Other Eligible Person Only - $20,000 (Other Eligible Person eligibility as determined by WSU)</td>
<td>$ 1.50</td>
<td>$ 2.00</td>
</tr>
<tr>
<td>Dependent Child(ren) Only - $10,000 Per Child (to age 26)</td>
<td>$ 0.75</td>
<td>$ 1.00</td>
</tr>
</tbody>
</table>

BENEFICIARY DESIGNATION FOR BASIC AND SUPPLEMENTAL EMPLOYEE COVERAGE

It is important that your employee beneficiary designation be clear so that there will be no question as to your meaning. It is also important that you name a primary and contingent beneficiary. If you need assistance, contact your benefits administrator or your own legal counsel. If you name more than one beneficiary with unequal shares, please show the amount of insurance to be paid to each beneficiary in fractional parts, for example “33% to Mary Jones, Mother and 67% to Edith Jones, Wife.” If a Trust is named, please indicate the date the Trust was established. If you have more than two primary beneficiaries complete a schedule and sign and date this form and the schedule.

The beneficiary for Life/AD&D insurance on the lives of your spouse and children (Dependent Coverage) will automatically be you, if surviving, otherwise, the estate of the spouse and children, subject to policy provisions.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Address</th>
<th>Social Security Number</th>
<th>Relationship</th>
<th>Date of Birth</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contingent</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I have been given the opportunity to enroll in the Supplemental Life/AD&D coverage. I understand that if I decline now, but later decide to enroll, I will be required to provide evidence of insurability that is satisfactory to Sun Life and understand my request for coverage may be denied. I authorize my employer to make the appropriate payroll deductions from my wages. I understand the benefit I have elected is limited to the maximum benefit available under the policy. I further understand that the Supplemental Life plan only covers eligible dependents as defined under the insurance policy.

Employee Signature (required) Date

This form should only be submitted if you are changing your current Supplemental and/or Dependent Life coverage, during the eligible Special Enrollment period.

2016 Special Enrollment http://hr.wayne.edu/tcw/health-welfare/life-insurance.php
### Supplemental Life / AD&D Rates for Employee Coverage

<table>
<thead>
<tr>
<th>Age</th>
<th>Total Monthly Rate</th>
<th>University Monthly Subsidy</th>
<th>Employee Monthly Rate</th>
<th>Total Monthly Rate</th>
<th>University Monthly Subsidy</th>
<th>Employee Monthly Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;25</td>
<td>$.051</td>
<td>$.002</td>
<td>$.049</td>
<td>$.068</td>
<td>$.002</td>
<td>$.066</td>
</tr>
<tr>
<td>25 - 29</td>
<td>$.060</td>
<td>$.002</td>
<td>$.058</td>
<td>$.080</td>
<td>$.002</td>
<td>$.078</td>
</tr>
<tr>
<td>30 - 34</td>
<td>$.078</td>
<td>$.002</td>
<td>$.076</td>
<td>$.104</td>
<td>$.003</td>
<td>$.101</td>
</tr>
<tr>
<td>35 - 39</td>
<td>$.087</td>
<td>$.003</td>
<td>$.084</td>
<td>$.116</td>
<td>$.003</td>
<td>$.113</td>
</tr>
<tr>
<td>40 - 44</td>
<td>$.096</td>
<td>$.003</td>
<td>$.093</td>
<td>$.128</td>
<td>$.004</td>
<td>$.124</td>
</tr>
<tr>
<td>45 - 49</td>
<td>$.135</td>
<td>$.004</td>
<td>$.131</td>
<td>$.180</td>
<td>$.005</td>
<td>$.175</td>
</tr>
<tr>
<td>50 - 54</td>
<td>$.195</td>
<td>$.006</td>
<td>$.189</td>
<td>$.260</td>
<td>$.008</td>
<td>$.252</td>
</tr>
<tr>
<td>55 - 59</td>
<td>$.345</td>
<td>$.010</td>
<td>$.335</td>
<td>$.460</td>
<td>$.014</td>
<td>$.446</td>
</tr>
<tr>
<td>60 - 64</td>
<td>$.485</td>
<td>$.015</td>
<td>$.470</td>
<td>$.647</td>
<td>$.019</td>
<td>$.628</td>
</tr>
<tr>
<td>65+</td>
<td>$.585</td>
<td>$.056</td>
<td>$.529</td>
<td>$.780</td>
<td>$.074</td>
<td>$.706</td>
</tr>
</tbody>
</table>

### To Calculate Your Cost for Employee Supplemental Life / AD&D Coverage

1. Indicate your base annual salary. *(For example, if your salary is $42,649, enter that in the box)*

   $_________________

2. Multiply the salary by 1, 2, 3 or 4 (your selected coverage level) and round up to the next $1,000.
   *(For example, $42,649 x 2 = $85,298 and round up to $86,000)*

   $_________________

3. Multiply the amount from Step 2 (per thousand) by the Employee Monthly Rate based on your age and your status *(For example, if you are age 45 and a 12-month employee, multiply 86 by $.131 to get $11.27)*
   *This is your estimated monthly cost.*

   $_________________

4. To get your cost per pay, take the amount in Step 3 and divide by 2. *(For example, $11.27 divided by 2 equals $5.64)*
   *This is your estimated cost per pay period.*

   $_________________

This form should only be submitted if you are changing your current Supplemental Employee and/or Dependent Life coverage during this Special Enrollment period.

Please send the completed Election Form by April 8, 2016 to:

Total Compensation & Wellness  
Wayne State University  
5700 Cass Avenue  
3638 Academic/Administration Building  
Detroit, MI 48202

Or, you may fax the completed Election form to (313) 577-0637.

The rates stated on this form are subject to change per the contract, including but not limited to rate changes at renewal and change in age bands.
March 28, 2016

RE: Supplemental (Additional) Life Insurance Plan Option to Increase Current Coverage Special Open Enrollment Period March 28, 2016 through April 8, 2016

Wayne State University is pleased to announce a special, one-time open enrollment for our Sun Life Supplemental Life insurance. This Special Open Enrollment will take place from March 28, 2016 through April 8, 2016. Changes you make to your Supplemental Life insurance will be effective on May 1, 2016. During the Special Open Enrollment you can increase your current election by 1 level without submitting evidence of insurability. Any increment you select that is more than 1 level above your current election will require that you provide evidence of insurability. If evidence is required, complete and submit the Evidence of Insurability Application found at http://hr.wayne.edu/tcw/health-welfare/life-insurance-evidence-of-insurability.pdf. The maximum Supplemental Life coverage is 4 times your annual salary (subject to plan maximum dollar limits).

The University is also offering you the option to purchase Dependents Life insurance if you do not currently have coverage for your eligible dependents. See the Coverage Highlights in this packet to learn more about coverage options for your dependents.

Supplemental Group Life can be a simple, easy way to increase the protection of your loved ones in the event of your death. You can apply for the amount of protection you want for yourself and your family.

Supplemental Life from Sun Life offers:

- **Competitive Group Rates.**
- **Choice.** You decide how much coverage you need from the amounts available.
- **AD&D Insurance Coverage.** AD&D coverage equal to your amount of Supplemental Life insurance is automatically provided.

Please review the enclosed materials below from Sun Life that explain your group insurance options more fully and will help you determine how much life insurance coverage you may need.

- Supplemental Life and AD&D Insurance Coverage Highlights
- Special Enrollment Form

If you choose to elect or increase Supplemental Life and AD&D coverage, complete the personalized Special Enrollment Form in this packet and return it to the Total Compensation and Wellness Department.

**Don’t miss the opportunity to enroll in or increase the amount of your Supplemental Life and AD&D insurance from Sun Life without evidence of insurability.**

**Enroll by returning the completed and signed Special Enrollment Form, enclosed in this packet,** to the Total Compensation and Wellness Department, 5700 Cass, Suite 3638, Detroit, MI 48202.

Sincerely,

Division of Human Resources, Total Compensation and Wellness Department

*Note: The last day to submit your Special Enrollment change is Friday, April 8, 2016. Special Enrollment Life Insurance forms will not be accepted after this date.*
Important Reminders:

- During this Special Open Enrollment period you can increase your Supplemental Life/AD&D insurance coverage amount one level with no medical questions asked!

- To enroll for additional Supplemental Life/AD&D coverage for yourself or your dependents, complete the enclosed enrollment form and return to Human Resources.

- You can elect coverage for your spouse and/or children without electing Supplemental coverage for yourself.

- Please use this time to update your beneficiary information (add new children, remove ex-spouse, etc.). WSU cannot disclose current beneficiary information over the phone.

- For Benefits Meeting dates and times refer to the back cover of this booklet.

- Forms are due to Human Resources no later than Friday, April 8th!
SPECIAL OPEN ENROLLMENT FOR LIFE INSURANCE  
March 28, 2016 through April 8, 2016

Employee Coverage During the Special Open Enrollment, you can enroll in the Supplemental (Additional) Life/AD&D plan at 1 times your annual earnings or increase your current coverage by 1 level above your current election without submitting evidence of insurability. If you apply for more than 1 level above your current election during the open enrollment, complete and submit the Evidence of Insurability Application found at http://hr.wayne.edu/tcw/health-welfare/life-insurance-evidence-of-insurability.pdf.

Dependent Coverage During the Special Open Enrollment, if your spouse and child(ren) are not currently enrolled in Dependent Life insurance, you may enroll them without submitting evidence of insurability.

Supplemental Life and Accidental Death and Dismemberment (AD&D) Insurance
It’s not easy to think about, but what if you suddenly died? Could your family live without your income? Would your family be able to cover the medical expenses associated with a terminal illness or with burial and funeral expenses?

Wayne State University provides you with a basic amount of Group Life insurance (at no cost to you) to help safeguard your loved ones in the event of your death. Since every employee’s needs are different, Wayne State University also offers you the opportunity to apply for Supplemental Life insurance from Sun Life Assurance Company of Canada.

This document will provide you with information about the optional coverage you may select through Wayne State University. Written in non-technical language, this is not intended as a complete description of the coverage. If you have additional questions, please check with Human Resources at AskHR@wayne.edu.

Eligibility
To be eligible for this plan:
- You must be insured for Basic Life Insurance
- You must be an eligible, active employee of Wayne State University, excluding, temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors
- You must be regularly working as a half-time or greater employee
- For Dependent Life insurance – Your spouse and/or children. Other Eligible Persons are eligible for spouse coverage. Eligible dependent children include any child claimed on your most recent income tax return, foster children to age 26 and disabled dependents over age 26.

Employee Coverage Amount
You may elect Supplemental Life coverage in 1, 2, 3 or 4 increments of your annual earnings, rounded to the next higher multiple of $1,000. The maximum amount of Supplemental Life and AD&D insurance you can elect is 4 times your annual earnings, subject to the maximum dollar amount for your Employee Group. All late applications and requests for coverage increases outside of this Special Open Enrollment or more than 31 days following a family status change are subject to medical underwriting approval. This means you will need to complete and submit an Evidence of Insurability Form to Sun Life Financial. Sun Life Financial will review it and determine if coverage is approved.

Accidental Death and Dismemberment coverage equal to your Supplemental Life insurance is automatically provided.

Dependents Life insurance from Sun Life is also available with this plan.
Dependent Life Coverage Amount
Dependent Life coverage for your Spouse is available in the amount of $20,000. You may elect $10,000 of Dependent Life insurance for your eligible children, regardless of the number of children covered.

During the Special One Time Open Enrollment Period for Life Insurance from March 28th through April 8th, if your spouse or child(ren) are not currently enrolled in Dependent Life, you may enroll them without submitting evidence of insurability. For your spouse, applications submitted outside this Special Open Enrollment period or more than 31 days following a family status change will require medical underwriting approval.

Employee Coverage Effective Date
The following requirements must be satisfied for your insurance to become effective. You must satisfy:

- Eligibility requirements
- An active work requirement. This means that if you are not actively at work on the day before the scheduled effective date of insurance including Dependent Life insurance, your insurance will not become effective until the day after you complete 1 day of active work as an eligible employee.
- An evidence of insurability requirement, if you determine that you need more insurance than the guarantee issue amount, satisfactory evidence of insurability is required. Complete and submit an Evidence of Insurability Form found at http://hr.wayne.edu/tcw/health-welfare/life-insurance-evidence-of-insurability.pdf.
- If you apply more than 31 days after the date you become eligible, satisfactory evidence of insurability is required. You will need to complete and submit an Evidence of Insurability Form found at http://hr.wayne.edu/tcw/health-welfare/life-insurance-evidence-of-insurability.pdf. In some cases, additional medical information or a physical exam may be required. However, some evidence of insurability requirements will be waived during the Special One Time Open Enrollment Period for Life Insurance.
- Evidence of insurability is required for reinstatement of terminated coverage and for members eligible but not insured under your employer’s prior life insurance plan.

Age Reductions
Your Employee amount of Basic and Supplemental Life and Accidental Death and Dismemberment Insurance will reduce to 67% when he attains 70, to 45% when he attains age 75, to 30% when he attains age 80 and to 20% when he attains age 85.

Suicide Exclusion
If the Employee’s cause of death is suicide:
- No amount of Supplemental Life Insurance is payable if the suicide occurs within 24 months after the Employee’s Supplemental Life Insurance is effective. Any period of time the Employee was insured for the same amount of Supplemental Life Insurance under the previous insurer’s group Life policy will count towards completion of the 24 months.
- No increased or additional amount of Supplemental Life Insurance is payable if the suicide occurs within 24 months after the increased or additional amount of Supplemental Life Insurance is effective.

Portability
If your insurance ends because your employment terminates, you may be eligible to buy portable group insurance coverage. Please see your human resources representative for additional information.

Accelerated Benefit
You may be eligible to receive up to 80 percent of your Basic and Supplemental Life insurance coverage if you become terminally ill, have a life expectancy of less than 12 months, and meet other eligibility requirements.
Repatriation Benefit
If an Accidental Death Benefit is payable and the Employee’s loss of life occurs at least 100 miles from the Employee’s permanent place of residence, Sun Life will reimburse the Executor or Administrator of the Employee’s estate for the reasonable and customary expenses incurred for the preparation of the body and its transportation to the place of burial or cremation up to a maximum benefit of $5,000 or $10,000 if the Employer is insured for Supplemental AD&D Insurance.

When Coverage Ends
Supplemental Life coverage ends automatically on the earliest of the following:
- the date this Policy terminates.
- the date the Employee is no longer in an Eligible Class.
- the date the Employee's Class is no longer included for insurance.
- the last day for which any required premium has been paid.
- the last day of the month in which the Employee retires, unless the Employee is eligible for Retiree Basic Life Insurance.
- the last day of the month in which employment terminates. Ceasing to be Actively at Work will be deemed termination of employment, except insurance may continue for limited periods under certain circumstances.
- the date the Employee requests, in writing, to have his insurance terminated.
- the date the Employee ceases to be Actively at Work due to a labor dispute, including any strike, work slowdown, or lockout.
- the date the Employee enters active duty in any armed service during a time of war (declared or undeclared).

When Spouse and Child Coverage Ends
A Dependent will cease to be insured on the earliest of the following dates:
- the date this Policy terminates.
- the date the Employee ceases to be insured.
- the date the Employee is no longer in an Eligible Class for Dependent Insurance.
- the last day of the month in which the Dependent ceases to qualify as a Dependent.
- the last day for which any required premium has been paid for insurance on the Dependent.
- the date the Employee requests, in writing, to have his Dependent Insurance terminated.
- the date the Employee dies.
- the date the Dependent enters active duty in any armed service during a time of war (declared or undeclared).
- the last day of the month in which the Employee retires.

Accidental Death and Dismemberment (AD&D) Insurance
With Supplemental AD&D insurance from Sun Life, you or your beneficiaries may be eligible to receive an additional amount in the event of death or dismemberment as a result of an accident.

AD&D Insurance Coverage Amount
The amount of this AD&D Insurance Benefit for loss of life is equal to the amount payable for Supplemental Life insurance coverage on the date of the accident.

The amount of this AD&D Insurance Benefit for other covered losses is a percentage of the amount payable for Supplemental AD&D insurance coverage on the date of the accident, as shown in the following table:
## Loss: Percentage Payable:

<table>
<thead>
<tr>
<th>Loss</th>
<th>Percentage Payable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life</td>
<td>100%</td>
</tr>
<tr>
<td>Sight of one eye</td>
<td>50%</td>
</tr>
<tr>
<td>One limb</td>
<td>50%</td>
</tr>
<tr>
<td>Speech and hearing</td>
<td>100%</td>
</tr>
<tr>
<td>Speech or hearing</td>
<td>50%</td>
</tr>
<tr>
<td>Thumb and index finger of the same hand</td>
<td>25%</td>
</tr>
<tr>
<td>Quadriplegia</td>
<td>100%</td>
</tr>
<tr>
<td>Paraplegia</td>
<td>75%</td>
</tr>
<tr>
<td>Hemiplegia</td>
<td>50%</td>
</tr>
<tr>
<td>Monoplegia</td>
<td>25%</td>
</tr>
</tbody>
</table>

The maximum amount of Accidental Death and Dismemberment Benefit payable for losses resulting from any one accident is 100%.

## Additional Features

Following are brief descriptions of features included in this plan. These features offer additional benefits when an AD&D Insurance Benefit is payable.

### Seat Belt Benefit
This provision provides an additional benefit in the event you die as a result of an automobile accident and you were properly wearing and using a seat belt system.

### Air Bag Benefit
This provision provides an additional benefit in the event you die as a result of an automobile accident for which a Seat Belt Benefit is payable and the automobile is equipped with an air bag system which deployed as evidenced by a police accident report and you were seated in the driver’s or passenger’s seat intended to be protected by the air bag system.

### Family Benefits Package
Through this provision, your eligible family members may be entitled to receive additional financial help for child care, college or career training. Included are the Child Care Benefit, Higher Education Benefit and Career Adjustment Benefit.

### Felonious Assault Benefit
This provision provides an additional benefit if you suffer death or dismemberment as a result of an act of workplace physical violence that is punishable by law.

### Common Carrier Benefit
This provision provides an additional benefit in the event of death as a result of an accident that occurs while you are riding as a fare-paying passenger on public transportation.

### Home Alteration or Vehicle Modification Benefit
This provision provides an additional benefit to adapt or reasonably accommodate your principal residence or automobile as a result of a covered accident or injury.

### Critical Burn Benefit
This provision provides an additional benefit for reconstructive surgery for burns suffered as a result of a covered accident or injury.

### Rehabilitation Training Benefit
This provision provides an additional benefit for rehabilitative training you require as a result of a covered accident or injury.

## Limitations

The loss must occur solely by an accident and independently of all other causes, within 365 days after the accident. Loss of life must be evidenced by a certified copy of the death certificate. All other losses must be certified by a physician in the appropriate specialty as determined by Sun Life Financial Group.
Exclusions
No Accidental Death or Accidental Dismemberment payment will be made for a loss which is due to or results from:

- suicide while sane or insane
- intentionally self-inflicted injuries
- bodily or mental infirmity or disease of any kind, or infection unless due to an accidental cut or wound
- committing or attempting to commit an assault, felony or other criminal act
- active participation in a war (declared or undeclared) or active duty in any armed service during a time of war
- active participation in a riot, rebellion, or insurrection
- injury sustained from any aviation activities, other than riding as a fare-paying passenger
- the Employee’s voluntary use of any controlled substance as defined in Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as now or hereafter amended, unless administered on the advice of a Physician
- the Employee’s operation of any motorized vehicle while intoxicated. Intoxicated means the minimum blood alcohol level required to be considered operating an automobile under the influence of alcohol in the jurisdiction where the accident occurred. For the purposes of this Exclusion, "Motorized Vehicle" includes, but is not limited to, automobiles, motorcycles, boats and snowmobiles.

When AD&D insurance Coverage Ends
AD&D insurance will automatically end on the earliest of the following:

- The date your Life insurance ends
- The date your Waiver of Premium begins
- The date AD&D insurance terminates under the group policy
- The date the last period ends for which a premium was paid for your AD&D insurance
- The date your employer’s coverage under the group policy for AD&D insurance terminates
- The date your employment terminates

Group Insurance Certificate
If you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage. The information presented above is controlled by the group policy and does not modify it in any way. The controlling provisions are in the group policy issued by Sun Life.

For Complete Plan Details
This is intended to provide an overview of the benefits available from your employer, and is not a complete description of plan provisions. Receipt of this does not certify eligibility for benefits under the plan. Your employer will provide you with the Sun Life Financial Group booklet containing complete plan details.

Additional Services
Sun Life Financial also provides the following services:

- Emergency Travel Assistance
- Identity Theft Protection
- Online Will preparation

Visit the Human Resources website for more information at http://hr.wayne.edu/tcw/health-welfare/life-insurance.php.
Attend a Life Insurance Benefits Meeting and learn more about:

- Supplemental Life Insurance
- Will Preparation available at no cost to you
- Travel Assist and Identity Theft Protection available at no cost to you

Benefits Meeting times and locations:

- Tuesday, March 29th
  - 12:00 pm at Purdy Kresge Library Auditorium
  - 2:00 pm at Scott Hall, Room 1328
- Wednesday, March 30th
  - 12:00 pm at Scott Hall, Room 1328
  - 2:00 pm at Purdy Kresge Library Auditorium

To register for one of these 30-minute meetings, log on to Academica and click on the following links: