**Qualifying Question for Life Insurance**

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| 1. Cancer, Heart Attach, Stroke or Diabetes-

When did you get it?What kind?Any complications?For diabetes- what is your AIC?Under control?Have you ever taken insulin?Any health issues now or in the past 10 years? |  |  |
| 1. What medications are you taken or have taken in the last 10 yrs (beside Antibiotics or Over the counter meds)
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| 1. Any hospital stays or surgeries in the last 10 yrs.
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| 1. Height & Weight- (refer to chart to see if they qualify)
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| 1. Smoker or Non Smoker-

Tobacco? what kind? If Chew, cigars, dip, marijuana (any of the above beside cigarettes can be non tobacco with Foresters) see tobacco chart |  |  |

Client \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Client \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_