



Canadian Residents
Notice of Group Life Conversion Privilege
 The Prudential Insurance Company of America

Subject to the conversion privilege contained in the Group Contract issued by The Prudential Insurance Company of America and described in your booklet/certificate, you may convert your group life insurance amount (or amount of reduction) to an individual contract by applying for the conversion and paying the first premium within 31 days following termination (or reduction) of your coverage. Application for conversion must be mailed directly to Manion Wilkins & Associates Ltd., 21 Four Seasons Place, Suite 500, Etobicoke, ON M9B 0A5. If you have questions, call us at 1-877-242-8632, then press #1. Fax 1-416-234-0127.

To be completed by Contract Holder:

Policy No./Control No. Claim Branch No.

Name of Employee Employee's Identification # Employee's Gender
 Male Female

Address

City Province Postal Code

Date of termination of employment Date of termination of insurance if other than date of termination of employment Date of reduction of insurance (if applicable)

Is this coverage assigned? Yes or No

(Assignment of a life insurance policy means the act of transferring the rights of property in the policy from one person to another. The person who transfers his right is called the "assignor" and the person to whom the right is transferred is called the "assignee.")

**Note: If coverage is assigned, please attach a copy of the assignment.

Please indicate the amount of group life insurance (or amount of reduction) eligible for conversion:

Employee	Dependent Child	Spouse
Basic \$ _____	Identification # _____	Identification # _____
Optional \$ _____	Basic \$ _____	Basic \$ _____
	Optional \$ _____	Optional \$ _____

Spouse's Name Date of Birth Gender
 Male Female

Child's Name Date of Birth Gender
 Male Female

Name of Employer

Employer's Address

Area Code/Telephone No.

Signature of Authorized Employer Representative Date of Notification

X

I hereby certify that the above statements are true, accurate, and complete to the best of my knowledge and belief.

I understand that Manion Wilkins & Associates Ltd., on behalf of The Prudential Insurance Company of America, will use the information provided by me on this form strictly for the purpose of converting my group life benefits into an individual life policy.

I hereby consent to the collection of the information on this form by my employer, and the release of the information on this form to the Canadian Insurance Company chosen by Manion Wilkins & Associates Ltd. to handle my life insurance conversion, solely for the purpose of authorizing such a conversion. A photocopy of this release shall be as valid as the original.

Signature of Employee

Date

X

Daytime Phone Number

Employee's Date of Birth

REMINDER: The Notice of Conversion Privilege must be submitted to Manion Wilkins & Associates Ltd.

Employee Term Life and Dependent Term Life Insurance coverages are issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ. Contract Series: 83500.

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