



Grid for Social Security Number

4 Return to Work

How does your condition prevent you from working right now? (Please be specific):

Three horizontal text boxes for describing work conditions.

Are you attempting to obtain resources to help you find work for wages or volunteer work? Yes No

What types of work do you feel you would be able to perform now or in the future?

Two horizontal text boxes for describing potential work types.

List any accommodations you feel would enable you to work now or in the future:

Two horizontal text boxes for listing accommodations.

5 Daily Activities

Describe your activities during a typical day, emphasizing the extent of which there is any activity requiring physical or mental exertion or contact with others (e.g. extent of participation in household chores-cooking, cleaning, yard work, buying food and clothing, participation in outside activities such as church functions, attending movies/theater, golfing, fishing, crafts, sporting events, swimming exercise programs, activities with children and/or grandchildren, etc.):

Three horizontal text boxes for describing daily activities.

Describe how you attend to your daily needs (e.g., dressing, bathing, hair care, etc.):

Two horizontal text boxes for describing daily needs.

Do you need assistance with any of these activities? Yes No

If yes, who helps you and to what extent?

Two horizontal text boxes for describing assistance.

Describe any hobbies or other leisure activities that help you occupy your time:

Two horizontal text boxes for describing hobbies.





Prudential

Claimant's Social Security Number

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6 Other Benefits

Are you receiving Disability or Retirement benefits from Social Security?

Are you receiving Disability benefits from a separate Individual Policy? Yes No

Are you receiving Workers Compensation benefits? Yes No

If yes, please provide the name and telephone number of the Workers' Comp carrier:

Are you receiving Disability or Retirement benefits from any other source? Yes No

I certify that the above statements are true.

Date Signed (MM DD YYYY)

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Signature



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