



Long Term Disability Employer Statement

The Standard requires information from the employer when an employee files a claim. This information is required in order for The Standard to review a claim. The claim will remain pending until this information is received. Once you know an an employee is filing a LTD claim, please answer the questions below and return to ltmosers@standard.com.

Item	Question	Response
1	What is the employee's name?	
2	What was the employee's last active day at work?	
3	Has the employee returned to work?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know
4	Date employee returned to work?	
5	What is the employee's job title?	
6	What are the regularly scheduled hours worked per week?	
7	Have the employee's job duties been modified to accommodate any limitations and restrictions? if so, please provide the date accommodated.	
8	What was the monthly salary on last day worked?	
9	What was the last date sick leave benefits were or will be paid by the employer?	
10	What was the last date through which any compensation was or will be paid by the employer?	
11	What was the type(s) of compensation paid by the employer?	
12	Is the current medical condition work-related?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know
13	Has the employee filed for Workers' Compensation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know
14	Has the employee filed for any other compensation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know
15	What is your name and email?	