

A copy of your current insurance license must accompany this form **OR** page 3 – State Licensing Information must be completed.

NOTE: Forethought may perform an investigative search into a producer's character and criminal history, as required by state insurance regulations.

Completed forms may be faxed to the attention of Licensing and Appointments at 1-785-286-6105.

Section A - Business line information

Select only the business line(s) in which you plan to conduct business:

- | | |
|---------------------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Final Expense Life Insurance | <input type="checkbox"/> Fixed Annuity |
| <input type="checkbox"/> Medicare Supplement / Life Insurance | <input type="checkbox"/> Fixed Index Annuity |
| <input type="checkbox"/> Preneed Life Insurance | <input type="checkbox"/> Variable Annuity |
| <input type="checkbox"/> TrustGuard | |

Section B - Producer information

Writing Producer		Social Security Number		NPN Number	
Date of birth	<input type="checkbox"/> Female <input type="checkbox"/> Male	CRD number (for FINRA registered producers)			
Producer's business street address		City		State	Zip Code
Producer's business mailing address		City		State	Zip Code
Residence street address		City		State	Zip Code
Business telephone number	Business fax number		Email (required)		

Section C - Firm Information

Name of firm or agency		Firm or agency Tax ID Number			
Firm mailing address		City		State	Zip Code
Firm telephone number		Fax number			
Please attach copies of your current licenses or complete page 3 - State Licensing Information					
<input type="checkbox"/> I have included a copy of my license(s)		<input type="checkbox"/> I have completed page 3 - State Licensing Information			



Section C - Firm Information continued

Comments (to indicate special requests or information related to your appointment):

Section D - Producer Disclosure (please read and sign)

Notice of background check and Fair Credit Reporting Act disclosure

This notice is being provided to you by Forethought pursuant to the Fair Credit Reporting Act ("FCRA"). As used herein, "Forethought" means Forethought Life Insurance Company, and its subsidiaries, affiliates, officers, employees, agents and representatives.

In connection with determining your eligibility for (i) an insurance agent or producer license, (ii) to be appointed or sponsored as an agent of Forethought, (iii) for any other certification or authorization to produce business with Forethought, and (iv) to maintain such license, appointment, certification or authorization in one or more states, Forethought may conduct background checks. Such background checks may include the ordering of "consumer reports" from a "consumer reporting agency" containing information on your criminal and credit history. These terms are defined in the FCRA.

California, Minnesota and Oklahoma Resident Producers Only: If you would like to receive a copy of your consumer report, if and when one is obtained, please check the box below.

I wish to receive a copy of any credit report concerning me which is used in connection with any insurance agent or producer license, appointment, certification, or authorization I may have or seek.

Authorization to order consumer reports

By signing below, I hereby voluntarily authorize Forethought to conduct one or more background checks, including obtaining reports relating to my financial/credit, criminal, driving and licensing history, and to use those reports in connection with any insurance agent or producer license, appointment, certification, or authorization I may have or seek, whether now or in the future, in any jurisdiction. This is a continuing authorization.

Print Producer's name

Producer's Social Security Number

Producer's signature

Date

State Licensing Information

Please complete the following information for each state in which you are licensed: check off whether you are a resident or non-resident of the state you are licensed in and provide your license number.

State	Resident/Non-Resident		License Number
Alabama	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Alaska	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Arizona	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Arkansas	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
California	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Colorado	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Connecticut	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Delaware	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
District of Columbia*	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Florida*	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Georgia	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Hawaii	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Idaho	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Illinois	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Indiana	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Iowa	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Kansas	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Kentucky	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Louisiana*	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Maine	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Maryland	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Massachusetts	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Michigan	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Minnesota	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Mississippi	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Missouri	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	

State	Resident/Non-Resident		License Number
Montana	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Nebraska	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Nevada	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
New Hampshire	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
New Jersey	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
New Mexico*	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
New York	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
North Carolina	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
North Dakota	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Ohio	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Oklahoma	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Oregon	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Pennsylvania*	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Puerto Rico	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Rhode Island	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
South Carolina	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
South Dakota	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Tennessee	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Texas	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Utah	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Vermont	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Virginia	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Washington*	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
West Virginia	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Wisconsin	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	
Wyoming	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident	

* In these states, you must be both licensed and appointed prior to solicitation.