



DIABETIC QUESTIONNAIRE (For completion by the Participant)

Note: This questionnaire forms part of your application for Takaful proposal. You are required to disclose in this questionnaire, fully and faithfully all the facts that you know or ought to know. Failure to take reasonable care in answering the questions may result in voidance of your contract of Takaful, refusal or reduction of your claim(s), change of the terms or termination of your contract of Takaful.

Full name of the Participant: _____

NRIC No. : _____ Certificate No. : _____

- 1. When were you first diagnosed to be diabetic?

- 2. What is the name and address of the doctor who made the diagnosis or informed you of your diabetes?

- 3. Are you now on oral treatment? If so, please give name of the drug and dosage.
[] No [] Yes

Name of drugs	Dosage/ Frequency
_____	_____
_____	_____

- 4. Are you now taking Insulin? If so, please give number of units per day.
[] No [] Yes; number of units per day: _____

- 5. Has your intake of Insulin or oral drugs varied during the last 2 years?
[] No [] Yes; please give details: _____

- 6. How often do you test your fasting blood sugar (FBS) and HbA1c? Please give reading over the past 6 months.

	Date	Reading
(i) FBS	____/____/____	_____
	____/____/____	_____
	____/____/____	_____
(ii) HbA1c	____/____/____	_____
	____/____/____	_____
	____/____/____	_____

- 7. Has any investigation been done eg. ECG, cholesterol test, kidney function test or etc. If yes, please give all details including dated and results of the tests.

Type of Investigation	Results	Date
_____	_____	____/____/____
_____	_____	____/____/____



_____ / _____ / _____

8. Since your treatment began, have you ever had a diabetic or Insulin coma requiring the assistance of another person, hospital admission or intravenous glucose?

[]No []Yes

Date : _____

Details: _____

9. Have you ever had:-

(i) Problems with your vision?

[]No []Yes; describe the problem

(ii) Circulatory problems with your legs?

[]No []Yes; describe the problem

10. Have you ever been told that your urine contains albumin / protein?

[]No []Yes; please give details including dates

DECLARATION AND AUTHORIZATIONS

I declare that the above answers are true and that I have not withheld any material information that may influence the assessment or acceptance of this proposal.

I agree that this supplementary questionnaire shall form part of my application for Takaful coverage with FWD Takaful Berhad and that failure to disclose any material fact known to me may invalidate the contract of takaful.

Signature of Participant

I/C No:

Date: