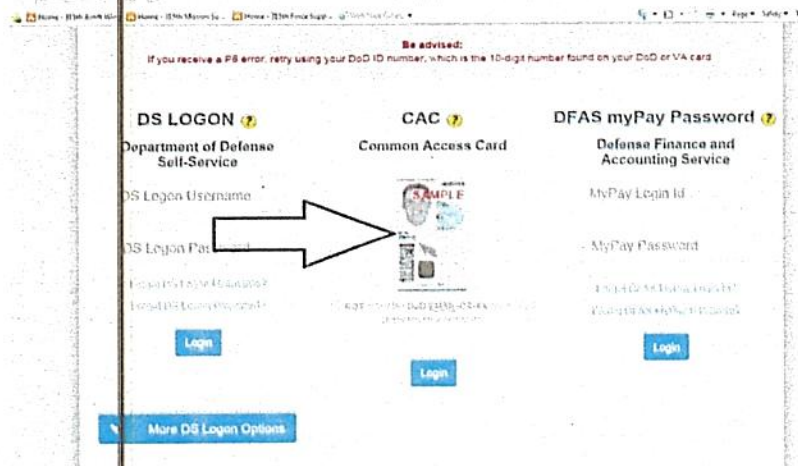


How to Verify/Update SGLI Online

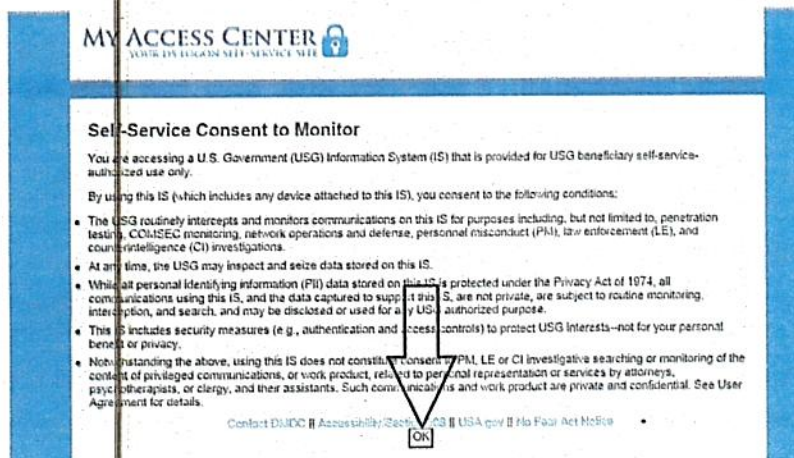
1. Sign into milConnect at <https://www.dmdc.osd.mil/milconnect>
2. Select "Sign In" in the top right corner



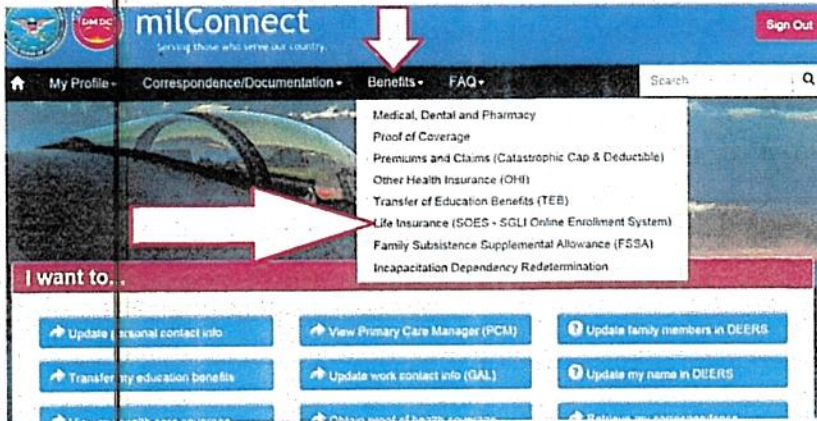
3. Select the CAC login option in the middle



4. Select "OK" to accept the consent to be monitored



5. Go to "Benefits" in the black banner at the top of the homepage and select "Life Insurance (SOES-SGLI Enrollment System)"



6. Scroll down and select "Continue"

Privacy Act Information

Authority: 38 USC §1967(a), (c), (e) and 38 USC §1970(a).

Purpose: The information you provide will be used to make changes to your Servicemembers' Group Life Insurance (SGLI) or Family SGLI (FSGLI) insurance benefits. Information you provide may be used to calculate any necessary deductions from your pay. Information provided will be used to generate a Certificate of Coverage which will be filed in your Official Military Personnel File. Upon a death covered by your policy, data may be provided to your Service casualty office for verification of coverage.

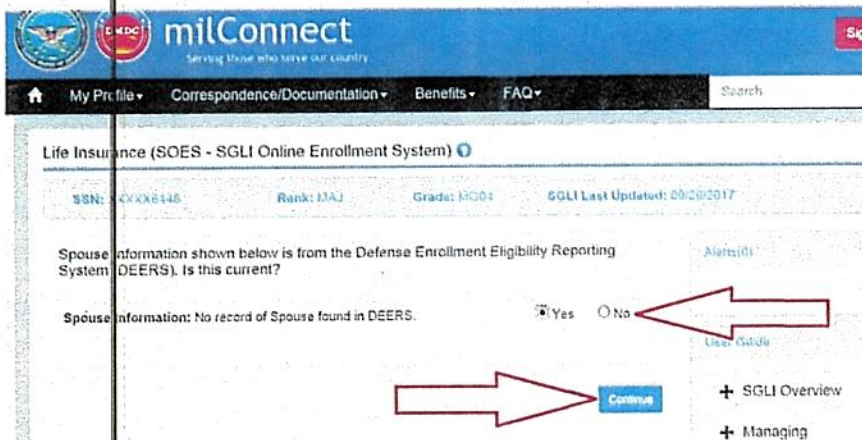
Routine Use: Data may be used by the Department of Veteran Affairs (DVA) to evaluate your coverage request, as well as to convert SGLI benefits to Veterans Group Life Insurance (VGLI). Upon a death covered by your policy, your information will be provided to the government contracted insurance company for the payment of the claim to your identified beneficiary.

Disclosure: Voluntary. Refusal to provide the requested information will not result in denial of benefits. However, if the requested information is not provided, it may impede efforts to identify and contact the beneficiary listed on your policy.

- + Medical Questionnaire
- + Confirm and Certify

Continue

7. Review the spouse information and select "Yes" or "No" then select "Continue"



8. Review your current coverage

9. IF the coverage amount is correct select "Confirm & Certify"

The screenshot shows the 'Your Coverage' page with the following elements:

- Navigation tabs: [Edit Coverage](#), [Edit Beneficiaries](#), [Print/Save Certificate](#)
- Alerts: Alerts(0)
- User Guide: [SGLI Overview](#), [What is SGLI coverage?](#), [What can I do in SOES?](#)
- Coverage Summary: **SGLI Coverage**, \$400,000.00 Premium, \$29.00
- Action: **Confirm & Certify** (highlighted with a red arrow)

OR

IF the amount is incorrect, go to "Edit Coverage" then go to "Edit Beneficiaries" and make updates as needed then select "Return to Your Coverage" and select "Confirm & Certify" on the main page

This screenshot is similar to the previous one but highlights the [Edit Coverage](#) tab and the **Confirm & Certify** button with red arrows.

The screenshot shows the 'Edit Coverage' page with the following elements:

- Navigation tabs: [Your Coverage](#), [Edit Coverage](#), [Edit Beneficiaries](#), [Print/Save Certificate](#)
- Alerts: Alerts(0)
- User Guide: [SGLI Overview](#), [Managing Coverage](#), [What do I need to do I increase or restore my SGLI coverage?](#)
- Coverage Selection: Radio buttons for 0k, 50k, 100k, 150k, 200k, 250k, 300k, 350k, 400k. The 400k option is selected.
- Premium: \$29.00 per month
- Total Premium: \$29.00
- Buttons: **Cancel**, **Continue**

10. Read all disclaimers and check all boxes then select "Continue"

The screenshot shows the 'Confirm & Certify' page with the following elements:

- Navigation tabs: [Your Coverage](#), [Edit Coverage](#), [Edit Beneficiaries](#), [Print/Save Certificate](#)
- Alerts: Alerts(0)
- User Guide: [SGLI Overview](#), [Managing Coverage](#), [Managing Beneficiaries](#), [Managing Shares](#), [Print/Save Certificate](#), [Medical Questionnaire](#), [Confirm and](#)
- Disclaimers (all checked):
 - Payment Information** - I understand that my insurance proceeds will be paid to beneficiaries as outlined under the help topic "Who will receive your insurance benefit?"
 - Right to Speak With an Attorney** - I understand that if I have questions concerning this form, I may consult with a military attorney at no expense to me.
 - Combined SGLI and VGLI coverage** - I understand that I cannot have combined SGLI and VGLI coverages at the same time for more than \$400,000.
 - FSGLI Spouse Coverage** - I understand that:
 - If I am married or if I get married after completing this form, and my spouse is not in the military, my spouse is automatically covered under FSGLI and premiums for this coverage will be deducted from my pay unless I decline or cancel FSGLI coverage.
 - For FSGLI premium deductions to occur, my spouse must be registered in DEERS. Failure to register my spouse may result in my owing debts for unpaid premiums.
 - Beneficiary Update** - I have changed my beneficiary designation and/or payment instructions and I understand that this form cancels any prior beneficiary or payment instructions.
 - I certify that I understand all the information above.
- Buttons: **Cancel**, **Continue**

11. Preview the Certificate of Coverage and select "Continue"

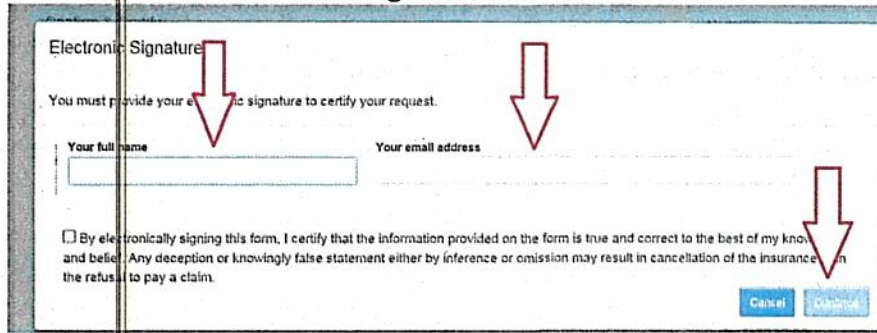
12. Fill in boxes for electronic signature and select "Continue"

Electronic Signature

You must provide your electronic signature to certify your request.

Your full name Your email address

By electronically signing this form, I certify that the information provided on the form is true and correct to the best of my knowledge and belief. Any deception or knowingly false statement either by inference or omission may result in cancellation of the insurance policy and the refusal to pay a claim.



13. Save and print a copy for your records