



Application for Invalidity Benefits

Important information about this form

Who should use this form?

Use this form if you are a member of the **Military Superannuation and Benefits Scheme** (MilitarySuper) and you are being discharged from the ADF as medically unfit for further service.

Do not use this form if you have ceased employment with the Australian Defence Forces other than on the ground of invalidity.

When to use this form

This form can be completed any time before discharge and no later than three months after discharge. However, it is more usual to complete the application as part of your discharge procedures.

Options

Before completing this benefit application form you are advised to read the **MilitarySuper Product Disclosure Statement (PDS)** available from our website at csc.gov.au, or by phoning **1300 006 727**.

On discharge on the ground of invalidity the benefits will vary according to your invalidity classification. For more information regarding this process please read the **Invalidity Benefits** factsheet.

There are two components to your Benefit: Employer Benefit and Member Benefit. You may also have a third component, an Ancillary Benefit.

If you are over 55 and being discharged from the ADF as medically unfit for further service, please also complete an M65 Benefit application. This is in the event you are classified **Class C** you can claim your employer benefit as a pension or lump sum

Employer Benefit

If you are classified **Class A** or **B** you will be entitled to a pension. However, if you are classified **Class C** you do not have any option to access your Employer Benefit – it must be preserved in MilitarySuper until you reach at least age 55. Your Employer benefit can be paid out earlier in some limited circumstances (e.g. severe financial hardship, specified grounds). For further details please see the **Early Access to your superannuation benefits** factsheet available from CSC website.

Member Benefit

Your Member Benefit consists of the number of units you hold in MilitarySuper plus any earnings thereon. Benefit payments result in the withdrawal of existing units at the unit price applicable on the later of:

- a) the day after exit
or
- b) the day on which a member's application is received by us.

If you transferred from DFRDB, your Member Benefit includes your DFRDB contributions plus notional earnings on those contributions.



Military
Superannuation &
Benefits Scheme

➡ About this form continued on next page

The options for your Member Benefit are:

- the **pre 1 July 1999** component can be taken as a cash lump sum, rolled over, or preserved in MilitarySuper
- the **post 30 June 1999** component must be preserved in MilitarySuper or rolled over to another Fund until you reach your preservation age and retire from the workforce.

If you preserve any of your pre 1 July 1999 component with MilitarySuper, any future withdrawal must be in multiples of \$10,000. There must be a minimum of six months between withdrawals.

Ancillary Benefit

You may also have an Ancillary Benefit. An Ancillary Benefit consists of any of the following that have been paid into your MilitarySuper account.

1. Additional Personal Contributions
2. Salary Sacrifice amounts
3. Transfer amounts
4. Spouse Contributions (please note that spouse contributions are those paid by your partner into your MilitarySuper account)
5. Co-contributions
6. Super Guarantee amounts
7. Low income contributions

You may rollover your Ancillary Benefit at any time. The Ancillary Benefit may be cashed out once you have reached your superannuation preservation age and:

- if you are less than 60 – you have permanently retired from the workforce
or
- if you are aged 60 or more – you have permanently retired from the workforce
or your current employment has ended.

Payment

Lump sum and rollover payments are normally paid within 15 working days after your discharge is confirmed or after the date we receive all necessary documentation to enable us to process your application, whichever is the later.

Rollover fund nominations

If you are choosing to rollover part of your benefit, it must be paid to a complying superannuation fund, rollover fund or Retirement Savings Account (RSA). We will not deduct tax from any amount rolled over to another fund however, the receiving fund will deduct 15% tax from any untaxed component of the rollover.

You can nominate two rollover funds or RSAs to receive all or part of your lump sum benefit. Complete one nomination if you are going to roll over your entire benefit to one fund. If you are going to split the amount, complete both nominations with details of the second fund.

We will make all rollover payments directly to your nominated rollover fund(s). Please make sure you have the correct postal address of your fund(s).

When completing this section you must include the name and Australian Business Number (ABN) for the nominated rollover fund or RSA. If you have a membership number (known as your Member Client Identifier) and a Unique Superannuation Identifier (USI) for the rollover fund or RSA, please include these numbers.

If you do not have these details, you can get them from the rollover fund or RSA. If you don't include these details, it will result in payment delays of your benefit. Please ensure your nominated rollover account(s) is active and can receive deposits from other superannuation funds. Failure to do so will result in the payment being returned to our office.

Surcharge debt

If you have a superannuation contributions surcharge debt, it will be deducted from your benefit before payment. In deducting the debt from your benefit, default provisions apply if you do not make an election after payment. CSC must receive your surcharge election in writing.

The default provisions are:

- if the Employer Benefit is converted to pension in part or full, any surcharge debt will be taken from the Employer Benefit after conversion to pension
or
- if the Employer Benefit is taken as a total lump sum, before tax the debt will be taken from the Employer Lump Sum Benefit.

Alternatively you can elect that instead of the default provisions applying, the debt be deducted from:

- the Employer Lump Sum Benefit before it is converted to pension
or
- the Member Benefit before it is paid as a lump sum
or
- the Ancillary Benefit before it is paid as a lump sum.

Proportioning

If you have not reached your preservation age and you claim your non-preserved (i.e. pre 1 July 1999) member benefit, the payment would normally include both tax-free and taxable components. However, you can choose to apply all your available tax-free amount against your lump sum (up to the amount of your pre 1 July 1999 benefit). For further information on how your benefit is taxed it is recommended that you read the **Tax and your MilitarySuper booklet** available from csc.gov.au.

Tax File Number

In accordance with the *Taxation Laws Amendment (Tax File Numbers) Act 1988*, we are required to deduct PAYG tax at the Top Marginal Rate plus the Medicare levy from benefits if a person does not provide a Tax File Number (TFN).

We are required to validate your Tax File Number (TFN) with the ATO's records to confirm the TFN provided is yours and is correct. Your TFN can be validated using the SuperTICK validation service at any time during your MilitarySuper membership and must be validated before your benefit can be rolled over to another fund. If you do not provide your TFN, the processing of your benefit payment may be delayed.

If you have not been issued a TFN you should lodge an **Australian Taxation Office Application/Enquiry** form with the Taxation Office. Forms are available at all Taxation Offices. You must provide proof of identity at the time you lodge the form.

Tax File Number Declaration form

If you are eligible to claim a pension benefit please complete the Tax File Number Declaration form, available from your local Tax Office. The information you provide on this form will determine how much tax will be deducted from your pension. Please note that you can only claim the tax-free threshold against one source of income.

Advice and more information

If you wish, you can seek advice from MilitarySuper on **1300 006 727** on your options and completion of this form.

We must provide you with any information you need to understand your benefit entitlements.

You can also read:

- **MilitarySuper PDS**
- **About to Leave the ADF?** factsheet
- **Invalidity Benefits** factsheet
- **Superannuation Contributions Surcharge** factsheet

All these publications are available on the CSC website at csc.gov.au

A financial advisor may also be able to assist.

Contact us

If you have any further questions about your benefit entitlements or investment options you can contact us in the following ways:

Mail

GPO Box 2252
Canberra ACT 2601

Internet

csc.gov.au

Phone

1300 006 727
for the cost of a local call

Email

members@enq.militarysuper.gov.au

Fax

(02) 6275 7010

How to use this form

Please use CAPITAL LETTERS and a black or blue pen.

Mark boxes like this ☐ with a ✓ or ✗ then fill out the next question or section.

Submitting your form

Post your completed original application and attachments to:

MilitarySuper
GPO Box 2252
Canberra ACT 2601
Australia

OR

You can fax or email documents to formsandapplications@csc.gov.au



Application for Invalidity Benefits

Form start

Read each section of the form carefully before filling it in.

A

About yourself

1.	Service	<input type="checkbox"/> Navy	<input type="checkbox"/> Army	<input type="checkbox"/> RAAF								
2.	Service number	<input type="text"/>										
	PMKEYS Number	<input type="text"/>										
3.	Salutation	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	<input type="checkbox"/> Other	<input type="text"/>					
	Surname	<input type="text"/>										
	Given name(s)	<input type="text"/>										
		<input type="text"/>										
4.	Former surname (if applicable)	<input type="text"/>										
5.	Date of birth	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
6.	Contact details before discharge	BUSINESS HOURS <input type="text"/>										
		AFTER HOURS <input type="text"/>										
		MOBILE NUMBER <input type="text"/>										
		EMAIL ADDRESS <input type="text"/>										
		@ <input type="text"/>										



Military
Superannuation &
Benefits Scheme

➔ Section A continued on next page

Postal address
before discharge[illegible]

SUBURB											STATE			POSTCODE		

Residential address
before discharge[illegible]

SUBURB										STATE		POSTCODE	

Postal address
after discharge[illegible]

SUBURB										STATE			POSTCODE		

Residential address
after discharge[illegible]

SUBURB										STATE			POSTCODE		

Contact details
after discharge

BUSINESS HOURS							

AFTER HOURS									
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[illegible]

Would you like to receive an SMS to confirm we have received your application?

☐ Yes ☐ No

Email address

[illegible]

☐ If you provide your email address, we will provide your pension advice letter and Payment Summary electronically via Pensioner Services Online and notify you by email of when they are available. Please tick this box if you want paper copies of those documents to be sent to the postal address above instead. You can change your communication preference at any time via Pensioner Services Online.

7. Your marital status

☐ Single

☐ Married

☐ Couple relationship (including same sex couple relationship)

Date of marriage or couple relationship commencement:

D	D	M	M	Y	Y	Y	Y

8. Spouse's surname

[illegible]

Spouse's given name(s)

[illegible]

Spouse's date of birth

D	D		M	M		Y	Y	Y	Y
		/			/				

B Exit details

9. Discharge centre
- Phone number
- If not known, contact your Pay Office
10. Date of Medical discharge / /
11. Substantive rank
- *If your discharge date changes please notify MilitarySuper ASAP.

C Superannuation Contributions Surcharge

12. Any surcharge debt remaining when a benefit becomes payable, whether in cash or by transfer/ rollover to another fund, will be deducted from the MilitarySuper benefit payable.
- If you have a Superannuation Contributions Surcharge debt, you will need to elect how it will be paid. The default provisions are that it can be taken from the Employer Benefit after conversion to pension, or, if the Employer Benefit is taken as a total lump sum, the debt will be taken from the before tax Employer Lump Sum Benefit
- How do you elect to have a Superannuation Contributions Surcharge debt deducted?
- ☐ Default provisions to apply
- ☐ From the Employer Lump Sum Benefit before it is converted to pension,
- ☐ From your Ancillary Benefit, if any
- or
- ☐ From the Member Benefit before it is paid as a lump sum

D Pension payment details (if applicable)

13. If you are classified **Class A** or **Class B**, your Employer Benefit will be paid as a pension. Give details of the account you want it paid into. The account must be in Australia.
- Type of financial institution ☐ Savings bank ☐ Building society ☐ Trading bank ☐ Credit union
- Name of institution
- Branch location
- Branch (BSB) number -
- Account number
- Account in name(s) of (must include your name)

Please complete the **Tax File Number Declaration**.

E

Member Benefit options

14. Member Benefit Payment options
- ☐ Preserve all in MilitarySuper
 - ☐ Rollover all
 - ☐ Rollover pre 1 July 1999 component and preserve the balance
 - ☐ Take all pre 1 July 1999 component as cash and preserve the balance
 - ☐ Take all pre 1 July 1999 component as cash and rollover the balance

Note: Please Complete Question 17 and / or 18 if you elect to rollover or take some or all of your member benefit to provide payment details

15. When you claim your MilitarySuper Benefit you may choose one of the following options for your non-preserved (ie pre 1 July 1999) Member Benefit.

- ☐ **Option 1**
Apply proportioning across the payment of your pre 1 July 1999 lump sum (in the same proportions as existed in your total Member Benefit)
- OR**
- ☐ **Option 2**
Apply all your available tax free component against the payment of your pre 1 July 1999 lump sum.

F

Ancillary Benefit options

16. Please indicate whether you would like to cash out or roll over any or all of your ancillary types, noting that **you can only cash out if you have satisfied the Condition of Release.**

The Condition of Release is that you have reached preservation age and:

- have permanently retired from the workforce
or
- your current employment has ended.

- ☐ Claim now – Fill out the table below
- ☐ Do not claim – Go to **Part G**
- ☐ Not applicable (you don't have an ancillary benefit) – Go to **Part G**

Ancillary benefit type		Cash out (only available if you have satisfied the Condition of Release)	Roll over any time
All types	100% only	<input type="checkbox"/>	<input type="checkbox"/>
OR			
i) Additional personal contributions	100% only	<input type="checkbox"/>	<input type="checkbox"/>
ii) Salary sacrifice	100% only	<input type="checkbox"/>	<input type="checkbox"/>
iii) Transfer amounts	100% only	<input type="checkbox"/>	<input type="checkbox"/>
iv) Spouse contributions	100% only	<input type="checkbox"/>	<input type="checkbox"/>
v) Co-contributions	100% only	<input type="checkbox"/>	<input type="checkbox"/>
vi) Super guarantee	100% only	<input type="checkbox"/>	<input type="checkbox"/>
vii) Low income contributions	100% only	<input type="checkbox"/>	<input type="checkbox"/>

Roll over

17. If you are rolling over any of your Member or Ancillary Benefit:

You may roll over to a maximum of two rollover funds. Unless you state otherwise, your Member and Ancillary Benefit will be rolled over to the same fund/s.

Payments will be made directly to the nominated rollover fund(s). A copy of the Rollover Benefits Statement will also be included with your benefit payment letter and sent to your nominated address.

Write the amount for each institution, except write 'BALANCE' for the last (or only) fund.



Important: Please ensure your nominated rollover account(s) is active and able to receive deposits from other superannuation funds. Failure to do so will result in the payment being returned to our office.

Name of **first**
rollover fund[illegible]Postal address
of fund**POSTAL ADDRESS**[illegible]

SUBURB

STATE

POSTCODE

PERSON										DATE			PERSON		

Australian Business No. (ABN)
of fund

[illegible]

Membership No. (known as your Member Client Identifier) for fund

[illegible]

Unique Superannuation Identifier (USI)

[illegible]

Amount

\$ _____

If you would like to roll over your benefit to more than one fund, please attach the same details as above for the second fund.

Refer to **Rollover fund nominations** instructions on page 2.

Cash

18. If you are taking any of your Member and/or Ancillary Benefit as lump sum cash, give details of the account you want it paid into. The account must be in Australia.

Type of financial institution

☐ Bank

Building society

☐ Credit union

Name of institution

[illegible]

Branch location

[illegible]

Branch (BSB) number

			-			
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Account number

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Account in name(s) of (must include your name)

[illegible]



Identification requirements

19.

To confirm your identity, we need some information from you—this is to protect your benefit against fraud, money laundering and terrorism financing, under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*.

Verifying your documents

You can authorise us to verify your identification electronically using the Document Verification Service (DVS). DVS is a national online system that allows approved government agencies and organisations to compare a member's identifying information with a government record. It is not a database and does not store any personal information. Requests to verify a document are encrypted and sent via a secure communications pathway to the document issuing authority for checking.

If you don't provide authorisation to have documents verified electronically or your documents are incompatible with DVS, you will need to provide certified copies of required documents. Please also refer to the section Certifying your documents.

An electronic copy of your identification documents will be stored in a secure environment and hard copies will be securely stored off-site. All copies will only be used for the purpose of confirming your identity. You need to send in identification with every application.

DVS is only compatible with some identification documents, these have been listed below.

Certifying your documents

If you're providing certified documents, the certifying authority must confirm in writing you are the valid holder of the identification you are presenting, and any copies are true copies of the original.



IMPORTANT: The certification must include the name, signature, qualification and registration number of the certifying authority (if applicable), and the date of the certification.

The following sample of certifying authorities can certify your documents in Australia:

- Dentist
- Employee of a Commonwealth authority engaged on a permanent basis with five or more years of continuous service who is not specified elsewhere in this document
- Financial Adviser or Financial Planner
- Justice of the Peace (JP)
- Legal Practitioner
- Medical Practitioner
- Member of the Australian Defence Force who is:
 - an Officeror
 - a Non-Commissioned Officer within the meaning of the *Defence Force Discipline Act 1982* with five or more years of continuous serviceor
 - a Warrant Officer within the meaning of that Act.
- Midwife
- Notary Public
- Nurse
- Occupational therapist
- Physiotherapist
- Psychologist.

For a full list of certifying authorities refer to **Schedule 2** of the *Statutory Declarations Regulations 2018* available at legislation.gov.au

Please note:
We require a copy of both sides of your identification document.

How can I meet the identification requirements?

You only need to provide **one** document from the **Primary photographic identification** category. If you can't provide any **Primary photographic identification** you will need to provide **one** secondary identification document from List A AND **one** secondary identification document from List B. We can only accept documents that are listed below for identification purposes.



If the name we hold on file for you is different to the name on your identification, or two pieces of identification are in different names, please provide a certified copy of your **Marriage** or **Change of Name certification**.




If you would like us to use DVS to verify your identification, please provide authorisation below.

☐ I confirm that I am authorised to provide the personal details presented and I consent to the information being checked with the document issuer or official record holder via 3rd party systems for the purposes of confirming my identity.

You must provide a copy* of **one** of the following:

Primary photographic identification

DVS compatibility is shown as  or 




-  A current Australian Driver's Licence.
-  A current Australian Passport (or one which has expired within the last two years).
-  A current Australian Proof of Age card (issued under a State or Territory law).

If your documents are incompatible with DVS, don't forget to provide certified copies.




Secondary identification requirements

Only provide these documents if you're unable to provide **one** of the **Primary photographic identification** documents.

List A

-  Your Australian Birth Certificate or extract issued by a State or Territory.
Please note: Birth Certificate extracts and Birth Certificates issued before 1970 may not be verified by DVS.
-  Your Citizenship Certificate issued by the Commonwealth.
-  Your current Pensioner Concession Card issued by the Department of Human Services.

List B

-  Your notice issued by the Australian Taxation Office (ATO) within the last 12 months that shows your name, current residential address, and records an amount payable either to or from the ATO.
-  Your notice issued by a local council or utilities provider in the last three months showing the provision of services and current residential address. **For example:** rates notice, electricity or water bill.
-  Your notice issued by the Commonwealth or a State or Territory government within the last 12 months showing your name and current residential address, and the provision of a financial benefit. **For example:** a Centrelink letter.

Certifying your documents overseas

If you live overseas and need to have documents certified, it needs to be done by a person authorised as a notary public in a foreign country, or by a person who is on a list of persons before whom a statutory declaration may be made and who has a connection to Australia. **For example:** a doctor who is registered in Australia and working overseas, or an Australian Consular Officer. Refer to ag.gov.au and dfat.gov.au for more information. Documents provided in a foreign language must be accompanied by a certified translation completed by an accredited translator.

Persons residing overseas and foreign residents may need to contact us.

***Please, don't send original documents.**



Pre-service skills, qualifications and experience

20. What grade/level of schooling did you complete before leaving school?
- Date of leaving school ^{D D} / ^{M M} / ^{Y Y Y Y}
21. What was the highest/last public examination you passed at school?
- ^{Y Y Y Y} Year of completion
22. What tertiary study or technical training have you completed?
- ^{Y Y Y Y} Year of completion
-
- ^{Y Y Y Y} Year of completion
23. What professional, technical or trade qualifications did you gain?
-
24. What tertiary study or technical training have you partially completed?
-
- ^{Y Y Y Y}
- Year(s) of study

If insufficient space please attach additional details.



Your pre-service employment history

25. Include self-employment and periods of unemployment
- Name of employer
- Employed as
- Brief description of duties undertaken
-
-
- Duration ^{D D} / ^{M M} / ^{Y Y Y Y} to ^{D D} / ^{M M} / ^{Y Y Y Y}
- Name of employer
- Employed as

[illegible]

D	D			M	M			Y	Y	Y	Y		D	D		M	M			Y	Y	Y	Y

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to
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D	D		M	M		Y	Y	Y	Y		D	D		M	M		Y	Y	Y	Y
		/			/					to			/			/				

[illegible][illegible][illegible]

D	D		M	M		Y	Y	Y	Y		D	D		M	M		Y	Y	Y	Y
		/			/					to			/			/				

[illegible][illegible][illegible]

D		D		M		M		Y		Y		Y		Y		D		D		M		M		Y		Y		Y		Y	

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If insufficient space please attach additional details.

In-service education and training

[illegible]

Y	Y	Y	Y
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[illegible]

[illegible]

Y	Y	Y	Y

[illegible][illegible]

D	D

/

M	M

/

Y	Y	Y	Y

to

D	D

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Y	Y	Y	Y

[illegible][illegible]

D D / M M / Y Y Y Y to D D / M M / Y Y Y Y

[illegible][illegible]

D D M M Y Y Y Y D D M M Y Y Y Y

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		/			/					to			/			/				

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Tax File Number

30. Under the *Superannuation Industry (Supervision) Act 1993*, we are authorised to collect your Tax File Number (TFN), which will only be used for lawful purposes.

These purposes may change in the future as a result of legislative change. We may disclose your TFN to another superannuation provider when your benefits are being transferred, unless you request in writing that your TFN not be disclosed to any other superannuation provider.

We are required to validate your TFN with the ATO's records to confirm the TFN provided is yours and is correct. Your TFN can be validated using the SuperTICK validation service at any time during your MilitarySuper membership and must be validated before your benefit can be rolled over to another fund. If you do not provide your TFN, the processing of your benefit payment may be delayed.

It is not an offence not to quote your TFN. However, giving us your TFN will have the following advantages (which may not otherwise apply):

- we will be able to accept all types of contributions (subject to scheme rules)
- the tax on contributions to your superannuation account/s will not increase
- other than the tax that may ordinarily apply, no additional tax will be deducted when you start drawing down your superannuation benefits
- it will make it much easier to trace different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.

If you have already provided your TFN to us, you are under no obligation to provide it again in this application.

Your Tax File Number

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Your TFN remains confidential

Can MilitarySuper give your TFN to the Rollover Fund(s)/RSA(s) nominated above?

☐ Yes ☐ No



Document checklist

31. If applicable, when you lodge this form, please provide the following documents:

- ☐ **A copy of the Defence Force's acceptance of long service leave credit**
– If you joined the Defence Force before 1 July 1983, your eligible service period (for PAYE taxation purposes in respect of any lump sum payments) may include periods of employment recognised for long service leave purposes. If such a period is not already included in your total period of effective service, you should provide details of the periods if you wish to have them included in your eligible service period. If you claim an additional period, you must attach to this application a copy of the Defence Force's acceptance of the periods for long service leave purposes.
- ☐ **A Marriage Certificate or Registered Relationship Certificate.**
- ☐ **Medicare levy variation declaration**
(if you are claiming a Medicare levy exemption against a pension entitlement) – the form is available from your local Taxation Office.
- ☐ **Print from Department of Defence showing In-service Education Training**
(you must provide this document if possible).
- ☐ **Print from Department of Defence showing In-service Employment History**
(you must provide this document if possible).
- ☐ **Certified copies of documents requested to prove your identity**

Member declaration

32.

I declare that:

- the information I have provided is true and correct to the best of my knowledge
- I acknowledge that it may be a criminal offence to knowingly provide false or misleading information or documents
- I have been advised to read the **MilitarySuper PDS** before completing this application form
- I understand the options available for my benefit entitlement.

I also declare in relation to my Tax File Number (TFN) that:

- I have read and understood the information set out in **Part L** – I understand that supplying my TFN is optional and that if I have not provided my TFN, tax will be deducted at the highest marginal rate
- the TFN I have provided is the same number advised to me by the Australian Taxation Office
- the TFN will be provided to a rollover fund unless I advise you not to.

I understand that if I have not provided all the required information, this application may be returned to me for completion and payment may be delayed.



Sign

SIGNATURE

Date signed

D	D	M	M	Y	Y	Y	Y

- ☐ I do not want my contact details passed to a commissioned independent research firm for the purpose of participating in research on the service provided by MilitarySuper.



Department of Defence – Authority to provide medical and employment records

33.

Service number/
Employee ID[illegible]

I,

GIVEN NAME(S)

[illegible][illegible]

SURNAME

[illegible]

of

RESIDENTIAL ADDRESS

[illegible][illegible]

SUBURB

[illegible]

STATE

--	--	--

POSTCODE

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authorise the Department of Defence to make available to Commonwealth Superannuation Corporation (CSC) full records relating to my employment, training and medical history (including clinical notes and psychological records) in respect of my Defence Force service and/or advice in respect of such employment, training and medical history.

I also authorise CSC to release copies of the documents obtained under this authority to appropriate medical advisers where such release is necessary for the administration of the *Military Superannuation and Benefits Act 1991*.

I understand that, whilst the information will be subject to standard confidentiality requirements, CSC may be obliged, under the legislative provisions that have application to it, to release the information provided, in whole or in part, to a tribunal or Court.

This authorisation is to remain in force until revoked by me in writing.



Sign

SIGNATURE

Date signed

D	D	M	M	Y	Y	Y	Y

 Section O continued on next page

I understand that any information relating to my medical history collected under this authorisation may be liable to release to other Australian Government agencies in accordance with the disclosure provisions of the Australian Privacy Principles contained in the *Privacy Act 1988*, in particular, to those agencies (such as the Department of Veterans' Affairs) concerned with the provision of financial benefits which may be affected by your entitlements under the *MSB Act 1991*.



I,

of

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This authorisation is to remain in force until revoked by me in writing.

Date signed

D	D	M	M	Y	Y	Y	Y

I understand that any information relating to my medical history collected under this authorisation may be liable to release to other Australian Government agencies in accordance with the disclosure provisions of the Australian Privacy Principles contained in the *Privacy Act 1988*, in particular, to those agencies (such as the Department of Veterans' Affairs) concerned with the provision of financial benefits which may be affected by your entitlements under the *MSB Act 1991*.



Lodgement

You have now completed this form.

35. Post your completed original application and attachments to:

MilitarySuper
GPO Box 2252
Canberra ACT 2601
Australia

OR

You can fax or email documents to **formsandapplications@csc.gov.au**

Privacy

We're collecting the information on this form for the following reasons:

- to confirm your identity
- to assess your eligibility for payment/rollover of the benefit
- to record up to date details relating to your spouse (if applicable) for future benefit eligibility
- to pay your benefit or to roll it over
- to contact you.

Personal information that you or a third party provide, such as your employer, is collected, held, used and disclosed as required or authorised by law in accordance with the privacy policies and notice, available via **csc.gov.au** or by contacting us on **1300 006 727**, for the purpose of managing your super. This includes the management of superannuation investments, providing superannuation products and information, the administration of accounts, conducting market research and product development. The privacy policies and notice contain important information about how personal information is handled, including rights to access and update that information and how a complaint about a breach of privacy can be made.

End Form



Need assistance?
Call us on the phone
numbers below



Email
members@enq.militarysuper.gov.au



Phone
1300 006 727



Fax
(02) 6275 7010



Post
MilitarySuper
GPO Box 2252
Canberra ACT 2601



Web
csc.gov.au



Overseas Callers
+61 2 6192 9502