



Early Release of Super Form

The Victorian Independent Schools Superannuation Fund

(ABN 37 024 873 660, RSE Registration Number R1000436, MySuper Authorisation 37024873660599)

Trustee: VIS Nominees Pty Ltd (ABN 11 006 586 367, AFS Licence Number 235097, RSE Licence Number L0000321)

GPO Box 4974, Melbourne VIC 3001 | Telephone: 1300 660 027

Email: super@vissf.com.au | Website: www.vissf.com.au

Use this form if you have been impacted by the COVID-19 coronavirus and would like to apply for the temporary early release of your superannuation, subject to meeting the Government's eligibility requirements.

Please use BLOCK LETTERS and a black or blue pen to complete this form.

1. PERSONAL DETAILS

Member Number: _____ Date of Birth: / /

Title: Mr Mrs Ms Miss Gender: _____

Given name(s): _____

Surname: _____

Residential Address: _____

Suburb: _____ Postcode: _____

Email: _____

Do you give permission for VISSF to contact you via email? _____

Home Phone: _____ Mobile: _____

Tax File Number (TFN): _____

VISSF might already hold your TFN. However, if you're not sure whether you have previously provided it, you can supply it again for our records. It is not mandatory to provide your TFN.

2. PAYMENT DETAILS - EFT TRANSFER

Electronic Funds Transfer (EFT) - for faster payment

I would like my benefit payment to be transferred/paid to me electronically. My nominated bank account details for EFT are as follows:

Account name: _____

Name of bank/financial institution: _____

BSB: _____

Account Number: _____

An EFT payment can only be made if the nominated bank account is in your name or is a joint account in your name, otherwise the payment will be made by cheque. If you do not choose EFT by providing your bank account details, your benefit will be paid by cheque and issued by standard post.

3. PROVING YOUR IDENTITY

You need to provide proof of your identity before we can pay you your benefit. This ensures your benefit is paid to you and no one else. There are two ways to prove your identity.

OPTION A: Provide certified copies of identification documents

Attach copies of certified proof of identity with this form. Refer to the section called [Certified identification requirements](#) to understand how to have your documents certified. I understand VISSF may use the information from these documents in conjunction with the information on this form to verify my identity electronically using independent data sources.

OPTION B: Use electronic identification

Provide your Medicare card details and either your driver's licence or Australian passport details. I agree to VISSF using these and the other details on this form to verify my identity electronically using independent data sources.



Make sure the details you provide are accurate. If your personal details in Section 1 do not match your electronic identification details, we will not be able to use your personal details to prove your identity, which will delay processing your request.

(i) Medical Details

Full name (including initials – as shown on your Medicare card):

Medicare number:

Valid to:

Your reference number on this card is:

(ii) Australian Drivers Licence

If you provide passport details below, you don't need to provide licence details here.

Given name/s (as shown on your licence):

Surname (as shown on your licence):

Australian driver's licence number:

State of issue:

Expiry date: (DD/MM/YYYY)

(iii) Australian Passport

If you provide drivers licence details above, you don't need to provide passport details here.

Given name/s (including middle name – as shown on your passport):

Surname (as shown on your passport):

Australian passport number:

Place of birth (as shown on your passport):

Country of birth (not shown on your passport):

Family name at birth (not shown on your passport):

Certified Identification Requirements

If you are unable to provide the details for electronic identification, you can provide certified identification documents instead.

Make copies of your identification and take these, along with the original documents, to the police station or post office. Before you go, make sure:

- you check if your identification is double-sided and copy both sides;
- your identification is current or recent enough;
- you supply an English translation by an accredited translator, if the documents are written in a foreign language.

To ensure your documents are certified correctly, please make sure the authorised person:

- writes or stamps in English on the front page of your copies, words to the effect of ***This is a true and correct copy of the original***;
- writes their name, qualification – such as Police Officer – and registration number if applicable; and
- includes their signature and the date.

Post your form and certified copies.

- Send us the certified copies of your identification, not the originals.
- Include this completed Early Release of Super form.

4. DECLARATION

- I request my benefit to be paid by VISSF as instructed on this form.
- I understand that when my full benefit is paid, VISSF shall be released from all claims, liabilities and obligations in respect of my interest in VISSF.
- I am aware that I have the right to request more information I require to understand my benefit entitlements in VISSF, including any insurance cover, fees and charges that may apply to the benefit withdrawal.
- I understand any insurance arrangements with VISSF will cease from the date that the full benefit is paid or if there are insufficient funds in my account to pay the premiums.
- I have sufficient information to make an informed decision about the payment of my benefit.
- I am an Australian or New Zealand citizen or a permanent resident of Australia and am not a current or former temporary resident of Australia.

Signature: _____

Date: / /

5. SEND THE COMPLETED FORM

Post this SIGNED and DATED form together with required documents to:

VISSF, GPO Box 4974, Melbourne VIC 3001

CHECKLIST

Before you post this form please complete the following checklist to ensure that you have completed all of the necessary sections and all required information has been supplied.

- This application has been completed in full
- I have included all of my certified identification or provided authorisation to validate my identification independently
- The declaration in Section 4 above has been signed and dated.