

Referee statement Identity confirmation

Use this form when confirming the identity of an individual within your community who is applying for a benefit payment from Australian Retirement Trust.

Important: This form is applicable to the Public Offer Division of Australian Retirement Trust. Please provide us with as much information as possible. Please tick box where appropriate. Use **BLOCK** letters and dark ink when completing this form and ensure it is signed and dated. *DENOTES MANDATORY FIELD.

Member number
if already a member

1 Member or beneficiary details

Title	First name*	Middle name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last name*	Date of birth (DD/MM/YYYY)*	Gender*
<input type="text"/>	<input type="text"/>	<input type="text" value="M"/> <input type="text" value="F"/>
Street Address/PO Box*	Country of Birth*	
<input type="text"/>	<input type="text"/>	
Suburb/Town*	State*	Postcode*
<input type="text"/>	<input type="text"/>	<input type="text"/>
Home phone number	Daytime phone number*	
<input type="text"/>	<input type="text"/>	
Personal email address	Mobile phone number	
<input type="text"/>	<input type="text"/>	
Are you known by any other name(s)?	<input type="text" value="YES"/> <input type="text" value="NO"/>	If Yes, what other name(s) are you known by:
<input type="text"/>		

Previous address(s) (if applicable):

Street Address/PO Box	Suburb/Town	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address/PO Box	Suburb/Town	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

2 Member or beneficiary declaration you MUST sign in front of a witness

I declare that all the details on this form are correct.

Full name (print in BLOCK letters)*

Member or beneficiary to sign here*



Date (DD/MM/YYYY)*

3 Witness declaration

I declare:

- The member or beneficiary has *signed* and *dated* this form in my presence,
- I am over 18 years of age, and
- I am not the referee or a potential beneficiary.

Witness to sign here*
(Power of Attorney not accepted)



Full name (print in BLOCK letters)*

Date (DD/MM/YYYY)*

➔ Please continue over page

Title	First name	Last name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Type of referee/Title of Organisation		
<input type="text"/>		
Organisation (if applicable)		
<input type="text"/>		
Australian Business Number (if applicable)	Phone number	
<input type="text"/>	<input type="text"/>	

Important information

Who is eligible to act as a referee?

- An office bearer of an incorporated Indigenous organisation or Land Council,
- Community leader or recognised Elder,
- A school principal or School counsellor,
- A minister of religion,
- A health professional or manager in Aboriginal/Torres Strait Island medical services,
- A police officer,
- The current employer, or manager, of the member or beneficiary,
- A person before whom a statutory declaration can be made,
- Is NOT a parent, sibling, or child of the member or beneficiary.

I confirm:

- I am eligible to act as a referee,
- I have known the member or beneficiary for the period of: Years Months
- How I know the member or beneficiary is:

- The member or beneficiary has signed this form in my presence,
- The names listed on this form are all of the names that I am aware that the member or beneficiary has been known as,
- The date of birth listed on this form is their actual or best approximate date of birth, and
- The addresses listed on this form are all the addresses where I am aware the member or beneficiary has resided.

Referee to sign here*

(Power of Attorney not accepted)



Full name (print in BLOCK letters)*

Date (DD/MM/YYYY)*

I declare:

- The referee has *signed* and *dated* this form in my presence,
- I am over 18 years of age, and
- I am not the referee or a potential beneficiary.

Witness to sign here*

(Power of Attorney not accepted)



Full name (print in BLOCK letters)*

Date (DD/MM/YYYY)*

Please return the form to Australian Retirement Trust online at australianretirementtrust.com.au/contact-us OR at Reply Paid 2924 Brisbane Qld 4001