CENTREPAY DEDUCTION AUTHORITY

Parent/Carer Family Name

Parent / Carer Given Name

Date of Birth

Phone Number

Email Address:

CENTRELINK CUSTOMER REFERENCE NUMBER ☐☐☐ - ☐☐☐ - ☐☐☐ - ☐

Smithfield State High School

STUDENT NAME/S: _____

Type of Request:

☐ **1. Start a new deduction** *Please complete Part A and D*

☐ **2. Change a current deduction** *Please complete Part B and D*

☐ **3. Cancel a current deduction** *Please complete Part C and D*

A. START A NEW DEDUCTION

From which payment do you want the deduction to be taken (e.g. Age Pension, Job Seeker, Family Tax Benefit or Parental Leave Pay)?

What amount do you want deducted?

The minimum Deduction amount for Centrepay is $20.

$

Which payment date do you want the deduction(s) to start from?

☐ Your next available payment date

OR

☐ A future payment date (up to 8 weeks in advance) ☐ / ☐ / ☐

Do you want to specify a target amount or end date?

Your deduction will stop if it is cancelled or if you reach a target amount or end date.

☐ No, just continue it until cancelled

OR

☐ Yes, stop at target amount $

OR

☐ A future payment date (up to 8 weeks in advance) ☐ / ☐ / ☐

B. TO CHANGE YOUR CURRENT DEDUCTION OR TARGET AMOUNT

CHANGE your current deduction or target amount

New deduction amount - each fortnight

$

Start date for the change

/ /

OR

CHANGE your current TARGET AMOUNT for deductions

New Target Amount

$

Start date for the change

/ /

C. TO CANCEL YOUR CURRENT DEDUCTION

Note: *You are about to cancel your Centrepay deduction. Make sure you have other arrangements in place if required*

From what date do you want the deductions to stop?

☐ Your next available payment date *OR* a future payment date of / /

D. AUTHORISATION – READ, SIGN AND DATE THE STATEMENT (MUST BE COMPLETED)

I authorise the Australian Government, Services Australia to make the above deduction each fortnight from my nominated Centrelink account and pay the amount to ***Smithfield State High School***, as I have directed within this form.

I give permission for ***Smithfield State High School*** to disclose my information to Services Australia for the purposes of checking my account number, billing number and amount I want to pay, and reconciling my payment Deduction details.

I also give permission for ***Smithfield State High School*** to give Services Australia my correct account and billing number if required.

I understand that:

I can change or cancel my Deduction at any time; and further information about Centrepay can be found online at www.servicesaustralia.gov.au/centrepay

If my deduction has a target amount and the final deduction is set to pay less than $2, my second last deduction will be increase by up to $2 to cover the final amount.

If I stop using the Business but do not stop my Centrepay deduction(s), the business may instruct Services Australia to stop the deduction(s).

x

Signature

/ /

Date

IMPORTANT INFORMATION

The Department of Education is collecting your personal information on this form for the purposes of confirming your consent to set up Centrepay arrangements for certain school fees (resources scheme, excursions etc.) or fees and charges pertaining to debts owing to the department. This form will be submitted to Centrelink centrepay as evidence of your consent for this arrangement and will allow your nominated school or business unit, on your behalf, to set up centrepay deductions, vary deductions or cancel deductions under the directions set out in the Centrelink centrepay procedural guide for businesses. We will only use your information for this purpose. It will otherwise not be used or disclosed unless authorised or required by law. If you have any concerns about the use and disclosure of your personal information on this form please contact the relevant school or business unit in the first instance.