

Step 3 – Mark type of change and details of change applicable

Address

Insert new postal address

Suburb

State

Postcode

Type of employment / Hours worked

Input date of employment status change

Input employment status as Casual, Part-time or Full-time

If Part-time or Casual input number of hours worked per week

Salary

Input date of Salary change

Input new salary (if Part-time input equivalent Full-time salary)

\$

Commencing leave without pay:

Input date commencing leave without pay:

Mark or input type of leave

Maternity

Unpaid

Other

Returning from leave without pay

Input expected returning date from leave without pay:

Are contributions to be suspended during period of unpaid leave?

Company Contributions

Yes No

Member Contributions

Yes No

Is insurance cover to be continued during the period of unpaid leave?

Death Cover

Yes No

Total and Permanent Disablement Cover

Yes No

Temporary Disablement Cover

Yes No

If the answer to any of the insurance cover questions is Yes:

• what salary is the insurance cover based on \$

Commencing work overseas

Input date commencing work overseas

Input country employee will reside in (and input new address above)

Returning from work overseas

Input date returning from overseas (input new address above)



Step 3 – Mark type of change and details of change applicable – *continued*

Transferring employment within Lutheran Super

New Employer Details

- Employer Name

- Date Commenced Employment

 / /

Previous Employer Details

- Employer Name

- Date Commenced Employment

 / /

Step 4 – Sign the form

Employer declaration / Authorised signatory

For the above changes I have:

- sighted the original or a certified copy of the Marriage Certificate, Deed Poll or change of name certificate from Births, Deaths and Marriages Registration office for the name change
- given the member information (including the relevant Product Disclosure Statement) describing the benefits applicable to the new category.

Signature

Date

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