

## BORONIA HEIGHTS STATE SCHOOL CENTREPAY DEDUCTION AUTHORITY

(To be used only if the customer cannot set up a deduction through MyGov)

Parent/Carer Family Name			Given Name(s)						
Parent/Carer Date of Birth	Phone Number		Email address						
/ /									
Student Name/s:									
CENTRELINK CUSTOMER REFERE	ENCE NUMBER		-						
School/Business Unit: Boronia H Reason for Deduction: Education	_	ool School/B	usiness Unit Custom	ner Number: 555-061-410-K					
Type of Request:									
<ol> <li>Start a new deduction</li></ol>									
What amount do you want deducted?  The minimum Deduction amount for Centrepay is \$10.  \$  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	_			<b>」</b> ¬					
Yes, stop at end date		/	/						

	CHANGE your current deduction PERMANENTLY							
	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.	<ul> <li>C. To CANCEL your current deduction         Note: You are about to cancel your Centrepay deduction. required     </li> <li>From what date do you want the deductions to stop?</li> <li>Your next available payment date</li></ul>		ther arran	gements in pla	ce if			
D.	D. Authorisation – read, sign and date the statement (	MUST be completed	)					
	I authorise the Australian Government Department of Human Service my nominated Centrelink account and pay the amount to Boronia H							
pur	I give permission for Boronia Heights State School to disclose my inf purposes of checking my account number, billing number and amou details.	•						
	I also give permission for Boronia Heights State School to give the D number if required.	epartment of Human Ser	vices my co	orrect account ar	nd billing			
l ur	I understand that:							
	I can change or cancel my Deduction at any time; and further inform humanservices.gov.au/centrepay	nation about Centrepay c	an be foun	d online at				
	If my deduction has a target amount and the final deduction is set to by up to $$2$$ to cover the final amount.	o pay less than \$2, my sec	cond last d	eduction will be	increase			
	If I stop using the Business but do not stop my Centrepay deduction Services to stop the deduction(s).	(s), the business may inst	ruct the De	epartment of Hu	man			
Yo	Your Signature	Dat	e					
			/	/				

B. To CHANGE your current deduction or target amount

## **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.