

CHOICE OF SUPERANNUATION FUND: STANDARD CHOICE FORM

Section A – Employee to complete

1. Choice of superannuation fund I request that all my future superannuation contributions be paid to:

☐ My employer's superannuation fund named in Section B, question 6 **OR** ☐ My own choice of superannuation fund

2. Your details

Name
Employee identification number (if applicable)
Tax file number (TFN)

Make sure your superannuation fund knows your TFN. You can check just by looking at your latest statement from them. It helps you keep track of your money, allows you to pay extra contributions, and makes sure the money gets taxed at the special low rate. Under the *Superannuation Industry (Supervision) Act 1993*, you are not obliged to disclose your tax file number, but there may be consequences, such as paying increased tax. See the document *How Super is Taxed* at www.mtaasuper.com.au/memberPDS/howsuperistaxed. If your TFN is provided, your employer must provide your TFN to the super fund.

3. Details of my chosen superannuation fund

Fund name
Fund address
Suburb State/Territory Postcode
Member No (if applicable)
Account name
Fund's Australian Business Number (ABN) (if applicable)
Unique superannuation identifier (USI) (if applicable)
Day time phone number
Fund electronic service address (ESA)

4. Appropriate documentation ☐ I have attached:

- a letter from the Trustee stating that this is a complying fund or retirement savings account (RSA) or, for a self-managed superannuation fund, a copy of documentation from the Tax Office confirming the fund is regulated
- written evidence from the fund stating that they will accept contributions from my employer, and
- details about how my employer can make contributions to this fund

Your employer is not required to accept your choice of fund if you have not provided the appropriate documents.

Signature

Date

Protecting your personal information has always been important to us and is required by law. The Commonwealth Privacy Act requires us to handle your personal information in accordance with a set of guidelines, known as the Australian Privacy Principles. Please view our full Privacy Policy online at www.mtaasuper.com.au/privacy which sets out our full obligations regarding the handling of your personal information.

☐ I consent to my personal information being used in accordance with MTAA Super's Privacy Policy

If employees do not complete a Standard Choice Form and return to employer, then default fund arrangements will apply.

Section B – Employer to complete

5. Your details

Business name
ABN
Signature

Date

6. Your employer nominated superannuation fund

If the employee does not choose a different superannuation fund, superannuation contributions will be paid to the following superannuation fund on behalf of this employee:

Fund Name
Unique Superannuation Identifier (if applicable)
For the product disclosure statement for this fund (if applicable) phone
Fund website
Electronic service address (ESA)

MTAA Superannuation Fund
MTA0100AU
1300 362 415

www.mtaasuper.com.au

<https://ws.qvalent.com/services/messaging/ebMS/SuperStream/msh>



For your records – This section must be completed when the employee returns the form to you with a completed Section A

Date valid choice is accepted

Date you act on your employee's valid choice

Do not send a copy of this form to the Australian Tax Office, or to your super fund. You must keep a copy for your own records for a period of five years. When you receive this form and all of the required information from your employee, you have two months to pay contributions to your employee's new fund. If they choose to stay with the fund you have chosen, make contributions as you are required.