# Contribution work test declaration

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **To the Trustee**: |  | | | |  | |  | |
|  | | Fund Name |  |  | |  | | Financial Year | |
| **Member Declaration** | | |  |  | |  | |  | |
|  | | |  |  | | | | | |
| Member Name | |  |  | Date of Birth | |  | |  | |
|  | |  |  |  | |  | |  | |
|  | | |  |  | |  | |  | |
| Member Address | |  |  | State | |  | | Postcode | |
|  | |  |  |  | |  | |  | |
|  | | |  |  | |  | |  | |
| Phone | |  |  |  | |  | |  | |

**Eligibility to Contribute**

*Please indicate which of the following options applies to your situation with a cross like the following* ***X.***

I declare that:

|  |  |
| --- | --- |
|  | I was aged 65 to 69 and I have worked at least 40 hours in a period of 30 consecutive days or less in the financial year in which this contribution was made/applies. |
|  |  |
|  | I was aged 65 to 69 and all contributions to my superannuation fund in the financial year in which this contribution was made/applies are either superannuation guarantee, employer certified agreement, spouse or award contributions. |
|  |  |
|  | I was aged 70 to 74 and I have worked at least 40 hours in a period of 30 consecutive days or less in the financial year in which this contribution was made/applies. |
|  |  |
|  | I was aged 70 to 74 and all contributions to my superannuation fund in the financial year in which this contribution was made/applies are either superannuation guarantee, employer certified agreement or award contributions. |
|  | I was aged 75 or older and all contributions to my superannuation fund in the financial year in which this contribution was made/applies are either superannuation guarantee, employer certified agreement or award contributions. |
|  |  |
|  | None of the above apply as I have not worked at least 40 hours in a period of 30 consecutive days or less in the financial year in which this contribution was made/applies and the contribution is not a superannuation guarantee, employer certified or award contribution. If this is the case, we cannot accept the contribution and it will be returned. |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Member Signature |  | Date |

**Contribution Type/ Age Criteria**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Less than 65 | 65-69 | 70-74 | 75 and over |
| Member Voluntary after-tax | Yes | Yes - Where the work test rule has been satisfied | Yes - Where the work test rule has been satisfied | No |
| Employer Superannuation guarantee (SG) | Yes | Yes | Yes | Yes |
| Spouse | Yes | Yes - Where the work test rule has been satisfied by the receiving spouse | No | No |
| Industrial award or agreement | Yes | Yes | Yes | Yes |
| Salary sacrifice or employer  Voluntary | Yes | Yes - where the work test rule has been satisfied | Yes - where the work test rule has been satisfied | No |