



BRACKEN RIDGE
STATE HIGH SCHOOL

CENTREPAY AUTHORISATION FOR DEDUCTIONS - Written

I _____ (Full Name)

(CRN)

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Authorise the Department of Human Services to make a deduction of \$ _____ each fortnight from my _____ (Centrelink payment- e.g Pension, Newstart Allowance, Family Tax Benefit) and pay this amount to Bracken Ridge State High School (CRN: 555-098-928-B) for payment of school fees and activities commencing from ____/____/____

I request that this deduction of \$ _____ continue until;

- A target amount of \$ _____ is reached.
If you set a "target amount" and the final deduction is set to be less than \$2, the second last deduction will be increased to _____. Do you agree with this happening? Response given _____
- OR
- Until further notice.

I request my current deduction of \$ _____ be cancelled as of _____

I give permission for Bracken Ridge State High School to disclose my information to the Department of Human Services 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 Bracken Ridge State High School to give the Department of Human Services 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 ***humanservices.gov.au/centrepay***.

Reference Name: _____

Customer Signature: _____

Date of Birth: / / **Contact number** _____

Date: _____

Strive To Accomplish



**BRACKEN RIDGE
STATE HIGH SCHOOL**

CENTREPAY AUTHORISATION FOR DEDUCTIONS

VERBAL CONSENT

- Can you please confirm your Date of Birth? / /
- Do you _____ (Name)

CRN

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Authorise the Department of Human Services to deduct \$ _____ per fortnight to pay Bracken Ridge State High School CRN 555-098-928-B for goods and services provided to you? Response given _____

- From which Centrelink payment would you like the Deduction taken from?
 - Pension
 - Newstart Allowance
 - Family Tax Benefit
 - _____
- On which date would like the Deduction to start? _____
- Would you like to set up a target amount or end date for your Deduction?
End date of _____ was given by client
If you set a “target amount” and the final deduction is set to be less than \$2, the second last deduction will be increased to _____. Do you agree with this happening?
- I request my current deduction of \$ _____ be cancelled as of _____
Response given _____
- Australian Privacy legislation protects your personal information. Do you give permission for Bracken Ridge State High school to disclose your information to the Department of Human Services for the purposes of:
 1. Checking your account number, billing number and the amount you want to pay:
And
 2. Reconciling your payment Deduction details Response given _____
- Can you please confirm that you also consent for Bracken Ridge state High School to provide your correct account and billing number if required to the Department of Human Services if required Response given _____
- Can you please confirm that you understand that:
 3. You can change or cancel your Centrepay deduction(s) at any time;
 4. Further information can be found online at humanservices.gov.au/centrepay
Response given _____

Reference Name: _____

Telephone Consent:

Consent script read and agreed to Yes/No

Consent Date: / / Consent Time: _____ am/pm

Strive To Accomplish