

PEOPLE AND CULTURE

Salary Packaging Application

EMPLOYEE DETAILS	
Family Name:	Given Name(s):
Staff Number:	Faculty/Division:
<p>I am an employee of La Trobe University, being entitled to a gross salary of \$..... per annum as at 20 July 2009.</p> <p>I have read and understood the documentation on the web (http://www.latrobe.edu.au/hr/manual/12/12.8-salary-packaging.doc) and agree to abide by the provisions in this documentation which may be varied from time to time and understand that I am advised to seek independent financial advice. I note that any pre-tax deduction that I request will not be backdated, and also acknowledge that benefits subject to FBT (e.g., vehicles) will now have the grossed up value reported on payment summaries.</p> <p>I hereby request La Trobe University to consider decreasing my gross salary to provide the following benefit(s) through deductions from my gross salary on a fortnightly basis:</p>	
SUPERANNUATION	
<input type="checkbox"/>	Payment of regular additional contributions to UniSuper commencing from the first pay period on or after / / for a continuous period until notified by me in writing to People and Culture to cease the deductions. Please specify fortnightly amount \$.....
<input type="checkbox"/>	Payment of regular additional contributions to UniSuper commencing from the first pay period on or after / / and last contribution to occur on / / . Please specify fortnightly amount \$.....
<input type="checkbox"/>	Payment of a lump sum contribution to UniSuper. Please specify amount \$.....
<input type="checkbox"/>	Payment of additional contributions to VicSuper Top-up commencing from the first pay period on or after / / . Please specify fortnightly amount \$
<p>I note that there is an administration salary sacrifice amount, currently being \$5.00 to commence the salary deduction into UniSuper/VicSuper Top-up and then a \$5.00 amount for any variation to the UniSuper/VicSuper Top-up deduction.</p>	
<input type="checkbox"/>	Payment of additional contributions to a Private Individually Sponsored Superannuation Fund. Please specify fortnightly amount \$..... Name of Superannuation Fund BSB Number....., and Account Number of bank where the money is to be deposited. A copy of a certificate of compliance is required. I note that there is a fortnightly administration salary sacrifice amount, currently being \$5.00 per fortnightly salary deduction, in respect of the benefit provided and I agree to this deduction amount as varied by the University from time to time.
<p>I acknowledge that:</p> <ol style="list-style-type: none"> It is my responsibility to seek financial advice. Should I wish to change or cease my contributions to UniSuper/VicSuper Top-up/Private Super, I will notify People and Culture in writing by giving one month's notice. It is my responsibility to ensure that there is sufficient net pay to meet all my current and any future deductions, e.g., car parking, private health fund. That, in the event of changes to legislation relating to superannuation and/or taxation that would impact on the University and/or its employees, the University reserves the right to renegotiate or terminate these arrangements in which case my salary will be restored to the full level. I will be required to either discontinue or resume payment of these contributions after tax. I understand that – <ul style="list-style-type: none"> Benefits arising from these pre-tax contributions will be subject to preservation requirements and, when paid, will not be treated as undeducted contributions A contributions tax will be deducted Tax concessional limits apply Pre-tax superannuation contributions are not eligible for the Government Superannuation Co-contribution scheme Superannuation salary sacrifice arrangements will be "Reportable Superannuation Contributions" for reporting on payment summaries. <p>Further information on the concessional limits and reportable superannuation contributions is available on the on the University's superannuation website http://www.latrobe.edu.au/pc/recruitment/super/contributions-into-unisuper.htm, UniSuper website – www.unisuper.com.au and the Tax Office website – www.ato.gov.au</p>	

Signature required on page 2

CHILD CARE (IN HOUSE BENEFIT)

Payment of Child Care Costs to the University's Child Care Centre at Bundoora

I note that there is a fortnightly administration salary sacrifice amount, currently being \$5.00 per salary deduction, in respect of the benefit being provided, and I agree to this deduction amount as varied by the University from time to time.

I acknowledge that should I wish to change or cease my deductions, I will notify the Children's Centre, in the first instance by filling out the appropriate form (available at either the Children's Centre or People and Culture <http://www.latrobe.edu.au/pc/forms/CHILDCARE%20CEASE%20PRETAX.doc>).

AIRPORT LOUNGE MEMBERSHIP

Payment of airport lounge membership. The original receipt for the membership will be provided to People and Culture when received. Please specify amount \$

I note that there is a fortnightly administration salary sacrifice amount, currently being \$5.00 per salary deduction, in respect of the benefit being provided, and I agree to this deduction amount as varied by the University from time to time.

LEASING OF A VEHICLE

Payment of costs associated with the leasing of a vehicle

I note that there is a fortnightly administration salary sacrifice amount, currently being \$10.00 per salary deduction in respect of the benefit being provided, and I agree to this deduction amount as varied by the University from time to time

I acknowledge that should I cease employment at La Trobe University, the University will deduct any monies owing in respect of this salary sacrifice agreement. If the reconciliation of the salary sacrifice arrangement is unable to be done at the time of ceasing employment, and money is owed to the University, I agree to reimburse the University when provided with the reconciliation.

I am aware that if the expense is subject to FBT, the grossed up taxable value will be added to my taxable income when lodging my tax return for the purposes of determining the extent of any liability to surcharges and payment obligations such as:

- Deductions for personal superannuation contributions
- Government superannuation co-contributions for low income earners
- Rebates for contributions to a spouse's superannuation
- Repayment of Higher Education Loan Programme (HELP) debts
- Medicare levy surcharge
- Child support payments
- Family allowances

I agree to comply with all GST requirements as part of this salary packaging. I also agree to cover all GST related costs through salary packaging arrangements offered by the University in the event that GST becomes payable.

I will notify People and Culture immediately of any leave without pay or my resignation from the University so that arrangements can be made to stop the payment of any expenses I am having salary sacrificed.

Signature of Employee

Date

Witnessed by