

Changing your occupational category



UNDERSTANDING OCCUPATIONAL CATEGORIES

There are three occupational categories, each reflecting the level of risk associated with different roles and occupations. You're automatically put into the General occupational category when you join.

If you're an office worker or a professional, you can apply to change your category so you'll pay less for your cover or get more for the same price.

Complete this form in blue or black pen using BLOCK LETTERS and tick where applicable.

PART 1: YOUR PERSONAL DETAILS

CareSuper member account number _____ Date of birth (DD/MM/YYYY) _____ Title _____

Surname _____

Given names _____

Residential address (must be advised)

Suburb _____ State/territory _____ Postcode _____

Postal address

Suburb _____ State/territory _____ Postcode _____

Mobile _____ Daytime telephone _____

Email _____

Employer name _____

Occupation _____

What industry do you work in? _____ \$ Total income per year _____

THE DETAILS

If you answered no to question 2, you qualify for the General occupational category.

If you answered yes to question 2, you qualify for the Office occupational category.

If you answered yes to question 2 and question 3, and to either question 4a or 4b, you qualify for the Professional occupational category.

- We'll review your occupational category each time you complete a new **Insurance application** form or apply to vary your insurance cover.
- If you're a new member and you don't complete this section, the General occupational category will apply to your cover.

If changing your occupational category increases your level of cover, some restrictions may apply to your extra cover. You will need to be in 'active employment' for all of the first 30 days from the date your occupational category changes. If you're not in active employment, you will receive 'limited cover' until you return to active employment for 2 consecutive months.

We've defined active employment and limited cover in the **Insurance Guide** available at caresuper.com.au/insuranceguide.

PART 2: YOUR OCCUPATIONAL CATEGORY

Answer the questions below to find out whether you're eligible to change your category.

- Are you:
 - Off work because you're ill, injured or have had an accident? Yes No
 - Unable to perform all the duties of your usual occupation, without any restrictions, on a full-time basis? Full time means at least 35 hours per week, even if you're only working part-time or casually. Yes No
 - Currently working in your usual occupation with duties that have been changed in the last 12 months because of an accident, illness or injury? Yes No

If you answered 'yes' to any of the above questions, you're not eligible to change your occupational category. If you answered 'no' to all of the questions above, please answer the following questions.
- Are your duties limited to professional, managerial, administrative, clerical, secretarial or similar 'white collar' tasks which don't involve manual work and do you undertake all your duties in an office environment (excluding travel time from one office environment to another)? Yes No

3. Are you earning over \$100,000 per year from your profession?

If you're currently working part-time and your full-time equivalent salary is more than \$100,000, you're eligible to answer 'Yes' to this question.

Yes No

4. a) Do you hold a tertiary qualification or are you a member of a professional institute or registered as a practising member of your profession by a government body?

Yes No

OR

b) Are you in a management role?

Yes No

Earnings are based on your Total Income, defined in our **Insurance Guide**, available at caresuper.com.au/insuranceguide.

PART 3: DECLARATION

3A. INSURANCE DUTY OF DISCLOSURE

Before CareSuper enters into an insurance contract in respect of a member, it has a duty to tell the insurer anything it knows or could reasonably be expected to know that may affect the insurer's decision to provide the insurance and on what terms.

CareSuper has this duty of disclosure until the insurance is provided. CareSuper has the same duty before it extends, varies or reinstates the contract.

CareSuper does not need to tell the insurer anything that:

- Reduces the risk of the insurance
- Is common knowledge
- The insurer knows or should know as an insurer, or
- The insurer waives the duty to tell the insurer about.

If you as a member of CareSuper do not tell the insurer something

If you, as the person whose life is to be insured as a member of CareSuper, do not tell the insurer something you know or could reasonably be expected to know that may affect the insurer's decision to cover you and on what terms, this may be treated as a failure by CareSuper.

If CareSuper does not tell the insurer something about you

If CareSuper does not tell the insurer something it is required to and the insurer would not have provided you with the insurance if it had been told, the insurer may avoid the contract within three years of entering into it.

If the insurer chooses not to avoid the contract, it may at any time reduce the amount of insurance provided to you. This would be worked out using a formula that takes into account the premium that would have been payable if CareSuper had told the insurer everything it should have. However, if the contract has a surrender value or provides cover on death, the insurer may only exercise this right within three years of entering into the contract.

PART 4: YOUR CONFIRMATION

I have read the duty of disclosure information above and I'm aware of my obligations as well as the consequences if I don't tell the insurer something.

I understand that my responsibilities under the duty of disclosure start now and continue until my application for cover has been accepted by the insurer in writing.

I declare that:

- The answers to all the questions and the declarations on this application are true and correct
- I haven't withheld any information which may affect the insurer's decision to provide me with insurance

Signature

Full name

If the insurer chooses not to avoid the contract or reduce the amount of insurance provided, it may at any time vary the contract in a way that places the insurer in the same position it would have been in if CareSuper had told the insurer everything it should have. However, this right does not apply if the contract has a surrender value or provides cover on death.

If the failure to comply with the duty of disclosure is fraudulent, the insurer may refuse to pay a claim and treat the contract as if it never existed.

In exercising its rights, the insurer may consider whether different types of cover can constitute separate contracts of insurance, and may apply its rights separately to each type of cover.

3B. PRIVACY OF YOUR PERSONAL INFORMATION

How CareSuper handles your personal information

CareSuper collects your personal information to establish and administer your superannuation account. If you choose not to provide your personal information CareSuper may not be able to process your insurance application or administer your superannuation account, or provide you with some services offered by CareSuper.

By signing this form, I confirm:

- I have read CareSuper's Privacy Policy, available at caresuper.com.au/privacypolicy.
- I understand how CareSuper intends to handle my personal information and acknowledge that my personal information will only be used for the purposes specified
- I consent to the collection and use of my personal information by the Trustee to process this insurance change and administer my superannuation account.

If you have any questions about your rights under the privacy legislation, please call us on **1300 360 149**.

• I acknowledge that the answers I've provided, together with any special conditions, will form the basis of the contract of insurance

• I have read and understood 'Privacy of your personal information' in section 3B and I acknowledge and consent to the my personal information being used and disclosed in line with that section

• I have read and understood the relevant **Member Guide PDS** and **Insurance Guide**

• I acknowledge that if I don't complete this application correctly, or if I don't sign and date this form, my application will be invalid and won't be considered by the insurer.



YOU MUST SIGN AND DATE THIS FORM

The form won't be valid if you don't sign it.

ONCE YOU'RE DONE

Return your cheque and completed form to:

**CareSuper
Locked Bag 20019
Melbourne VIC 3001**

For more information call **1300 360 149**

_____/_____/_____
Date (DD/MM/YYYY)