Education Savings Plan
Living Away From Home Declaration Form

CBESP-LAH02-001

Please phone the Customer Service Team on 1800 882 289 if you have any questions.
Please PRINT clearly in BLACK pen keeping well within the boxes.
Start at the left, write one letter in each box and leave one box between words.
Use crosses in the boxes marked with an "X".

Step One Your Details

Surname

First Name(s)

Address

Suburb

State Postcode

Phone

Student

Step Two Details of Living Allowance Claimed

Policy Number

Amount of Living Allowance Claimed $

(Limits apply, please call Customer Service on 1800 882 289 for current limits)

I confirm that the above named student is in: X full-time study X part-time study

Place of study

Address

Suburb State Postcode

Step Three Declaration

I / We

investor(s) of the above plan, hereby declare that the student nominated in step one is living away from home. I/We confirm that this declaration should remain in force until such time that written notice to cancel is received by Lifeplan.

Step Four Signature of Investor or Student

Investor Date D D M M Y Y Y Y

Investor Date D D M M Y Y Y Y

Or students over the age of 16 can make claims if we have received a written authority from the Investor to act on the instructions of the student.

Signature of Student Date D D M M Y Y Y Y

Lifeplan Funds Management is a business name of
Lifeplan Australia Friendly Society Ltd.
ABN 78 087 649 492 AFSL 237989

Return by Fax to:
Fax us the completed form on (08) 8212 2790

Return by Post to:
Lifeplan Funds Management
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