

Saver Plus referral sheet

Saver Plus is a matched savings and financial education program that assists people on lower incomes to strengthen their financial skills, develop a savings habit and save for educational costs

From	
Organisation	
Staff Name	
Staff contact number	
In Reference to	
Name of the person enquiring	
Address	
Telephone number/s	
Email address	
Is an interpreter required? If yes, what language?	
Best time to contact	
Preliminary eligibility check* – ALL tick criteria must be met; *Evidence not required at this stage	<input type="checkbox"/> Is at least 18 years old <input type="checkbox"/> Has a child at school or attends vocational education themselves i.e. TAFE <input type="checkbox"/> Regular income from work (you or your partner - casual, full or part-time work) <input type="checkbox"/> Health Care Card/Pensioner Concession Card <input type="checkbox"/> be in receipt of a Commonwealth social security benefit, allowance or payment (many Centrelink payments are eligible, please contact your local Coordinator for more information) <input type="checkbox"/> Has not completed the Saver Plus program before.
I, _____ (<i>name of person</i>), give my consent for my details to be passed onto a Saver Plus Coordinator who will contact me to discuss the Saver Plus program. Signed: _____	
Send to	
Please send to:	SaverPlusCL@thesmithfamily.com.au
Date Referral sent/given to Saver Plus Coordinator	