



Early Release : Rollover Application Form  
Retirement Fund (Administration) (Amendment) Regulation 2009

Member's Name: \_\_\_\_\_  
(Hingoa)

Member IC: \_\_\_\_\_

Ministry/Department: \_\_\_\_\_  
(Potungaue)

Phone No.: \_\_\_\_\_  
(Telefoni)

Current Employer \_\_\_\_\_  
(Ngaue'anga Lolotonga)

Address: \_\_\_\_\_  
(Tu'asila)

Name of nominated Retirement Fund \_\_\_\_\_  
(Hingoa 'o e Sino'i Pa'anga lolotonga)

Effective Date \_\_\_\_\_  
('Aho e ngata ai)

Application  
(Foomu)

PSC/Appropriate Authority Decision  
(Tohi tu'utu'uni mei he PSC)

Evidence of Employment  
(Tohi fakamo'oni mei he ngaue'anga)

Evidence of nominated Retirement  
Fund Membership  
(Tohi fakamo'oni memipa Kautaha Pa'anga  
Malolo fo'ou)

Evidence of approved  
Retirement Fund Status  
(Fakamo'oni 'oku tali koe Sino'i Pa'anga Malolo tali 'e  
he Lao Tukupau 2007.)

DECLARATION

I hereby indemnify the Retirement Fund Board from any liability whatsoever, including any loss of benefits that may arise as a consequence in acceding and approving my application for Early Release of my benefits.  
( 'Oku ou faka'ata 'a e Poate ki he Pa'anga Malolo mei ha nga'ahi mo'ua pe kau ai 'a e mole 'a 'eku monu'ia malolo mei he ngaue tu'unga 'i he tohi kole ni)

Signature: \_\_\_\_\_  
(Fakamo'oni 'a e Memipa)

Date: \_\_\_\_\_  
( 'Aho)

**Official Use Only**

Checked by:  
Benefit & Claims Officer: \_\_\_\_\_

Verified by:  
Operations Manager: \_\_\_\_\_

Recommendations

Approved     Not Approved

Decision by:  
Chief Executive Officer: \_\_\_\_\_

Date: 

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