

Annex 3.5.ZE: Navy – Medical Officer recruitment bonus scheme

This form is in four parts.

Part A – provides information about the offer and the bonus scheme, and is for you to keep.

Part B – your formal acceptance of the offer and your agreement to serve in the medical officer primary qualification for an agreed period of service.

Part C – your election about how the bonus is paid.

Part D – additional payment information if you choose to pay the money into a superannuation fund.

Part A: Offer and information about the scheme

This Part provides information about the retention bonus you have been offered, and is for you to keep.

If you fill in and sign the acceptance form at Part B, you are accepting an offer made to you under the Medical Officer recruitment bonus scheme authorised under Chapter 3 Part 5 Division 29 of Defence Determination 2005/15, Conditions of Service, made under section 58B of the *Defence Act 1903* ('the Determination').

Offer

The offer made is as follows:

.....[member's name] is hereby offered a bonus by **Director Navy People Career Management Agency**.

The attraction payment offered is an amount of \$....., and the completion bonus offered is an amount of \$..... which has been approved by the **Director General Navy People**.

If the offer is accepted, the member must perform a period of

.....service (the 'agreed period of service') in the medical officer primary qualification.

Signed this day by:

Name:.....Rank:.....
Director Navy People Career Management Agency

Information about the scheme

I understand that my acceptance of the attraction payment and completion bonus is subject to the following terms and conditions.

1. I hold a position, employment category, primary qualification or skill set for which I have been offered a bonus under this Division.
2. I am, and remain for the duration of the scheme, a registered medical practitioner within a State or Territory of the Commonwealth of Australia.
3. I cannot agree a period of service for the purpose of this bonus if it extends beyond the compulsory retirement age unless I also apply to extend my compulsory retirement age.
4. On joining the scheme, I will be paid the amount of attraction payment that was offered to me on completion of my initial entry officer training. If I am a member of the Naval Reserve who is deemed to have completed initial officer training, I will be paid the amount of recruitment bonus offered to me on transfer to the Permanent Naval Forces.
5. If I accept the offer of an attraction payment and completion bonus under this Division, I must serve the period specified in the offer. This period is called my 'agreed period of service' and I must serve it in the medical officer primary qualification for which the bonus was offered to me.
6. If I leave the medical officer primary qualification for which the bonus was offered to me by Navy for a reason within my control, I may have to repay a part of the bonus.
7. I may not be asked to repay part of the bonus if I do not complete the agreed period of service for a reason beyond my control. Examples are if I transfer out of the medical officer primary qualification for Service reasons; am retrenched or made redundant; am discharged for medical reasons; or die.
8. If I start to serve an undertaking for further service under Part 8 of the *Military Superannuation and Benefits Act 1991* (as preserved by item 4 of Schedule 4 of the *Defence Legislation Amendment Act (No. 1) 2005*) ('an MSBS undertaking') before I finish the retention bonus, I may not finish my agreed period of service for the retention bonus until after I have completed the MSBS undertaking.
9. If I start to serve a return of service (ROSO) or other undertaking for further service after I have accepted the offer of a retention bonus, I will have to complete my agreed period of service after I finish my ROSO or undertaking for further service.
10. I may elect to pay the scheme payments into a superannuation fund using the forms provided at Parts C and D.
11. Effective service for the retention bonus is continuous full-time service for which salary is paid. Leave or other events may not be effective service and may reduce my amount of retention bonus. The table in subclause 3.5.278.3 of the Determination shows what counts as effective service.
12. I am aware that Defence will treat the information in this acceptance form as my personal information covered by the *Privacy Act 1988* and I consent to Defence using it in de-identified form for reporting and statistical purposes. I am aware that if I publish this information to others, I may make the protections provided to me by the Privacy Act ineffective.

Full details of the completion bonus scheme are contained in Chapter 3 Part 5 Division 29 of Defence Determination 2005/15, Conditions of Service.

This acceptance form, and the related parts of Defence Determination 2005/15, is the whole agreement between us about the nature of this scheme. It overrides any other prior understanding or agreement about the scheme. This would include, for instance, things I may have been told about the scheme or things I may have read elsewhere.

Dated this day of 20

Signed

Printed name

Witness
*(This person must be
above the applicant in the
chain of command)*

Signed

Printed name and rank

I,

.....
(Rank) (Last name) (Given name) (Employee ID)

verify that the member has met all requirements for payment of the attraction payment.

Approved
Administrator authorised for and on behalf of the Navy

I,

.....
(Rank) (Last name) (Given name) (Employee ID)

verify that the member has met all requirements for payment of the completion bonus.

Approved
Administrator authorised for and on behalf of the Navy

Part C: Payment details

This form must be submitted along with the acceptance and undertaking to serve form (Part B).

.....
 (Rank) (Last name) (Given name) (Employee ID)

There are three options for payment.

- Option one: Paid into the member's normal pay account. The amounts will be taxed at the applicable tax rate at the time of payment.
- Option two: As an employer contribution to superannuation. This election is made once, but you will later be able to vary this election.
- Option three: As a combination of these.

All members are strongly advised to seek professional financial advice when making this decision. ADF members are not qualified to provide this advice.

Attraction payment

I choose this payment method for my attraction payment:

- Option one:** [] Paid into my normal pay account. The amounts will be taxed at the applicable tax rate at the time of payment.
- Option two:** [] The full amount paid as an employer contribution to superannuation. I have nominated a superannuation fund in Part D of this form.
- Option three:** []
1. _____% of the bonus payment as an employer contribution to superannuation. I have nominated a superannuation fund in Part D of this form.
 2. The balance of the amount paid into my normal pay account. These will be taxed at the applicable tax rate.

*Tick one box. Only select **one** of the options.*

Completion bonus payment

I choose this payment method for my payment of my completion bonus:

- Option one:** [] Paid into my normal pay account. The amounts will be taxed at the applicable tax rate at the time of payment.
- Option two:** [] The full amount paid as an employer contribution to superannuation. I have nominated a superannuation fund in Part C of this form.
- Option three:** []
1. _____% of the bonus payment as an employer contribution to superannuation. I have nominated a superannuation fund in Part C of this form.
 2. The balance of the amount paid into my normal pay account. These will be taxed at the applicable tax rate.

*Tick one box. Only select **one** of the options.*

Part D: Superannuation fund nomination

This section must be completed if either option two or three has been selected for one of the items in Part C. It is the member's responsibility to supply superannuation fund details.

I nominate this Eligible Choice Fund for my attraction payment.

Fund name

Fund number

Fund account number

Fund address

Member's account number.....

Dated this day of 20

Signed

Name (printed) _____

Work address _____

Occupation _____

Date _____

I nominate this Eligible Choice Fund for payment of my completion bonus.

Fund name

Fund number

Fund account number

Fund address

Member's account number.....

Dated this day of 20

Signed

Name (printed) _____

Work address _____

Occupation _____

Date _____