

Invalidity Pension

Under the Social Security Agreement between Malta and Australia



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* Indicates mandatory information

Application Received on __ / __ / ____

Personal Details

Maltese Identity Card N°: * _____ Maltese Social Security N°: _____
Name: * _____ Surname: * _____
Date of Birth: (DD/MM/YYYY) __ / __ / ____ Maiden Surname: _____
(in case of married female)
Centrelink Ref. N°: (if Known) _____

Civil Status *

Single Married Cohabitation Separated maintaining Spouse / Partner
 Civil Union Widow/er Divorced Separated not maintaining Spouse / Partner

Date of change in Civil Status (DD/MM/YYYY): __ / __ / ____

Contact Details *

Address

House Name / Number: _____ Locality: _____
Street: _____ Post Code: _____
Contact Number: _____ Email: _____

Spouse / Partner

The details requested are those of the other person forming part of this family unit

Maltese Identity Card N°: * _____ Maltese Social Security N°: _____
Name: * _____ Surname: * _____
Date of Birth: (DD/MM/YYYY) __ / __ / ____ Maiden Surname: _____
(in case of married female)
Centrelink Ref. N°: (if Known) _____

If spouses are legally separated, attach a legal copy of Court's Order

Pension Details

Are you receiving or expecting to receive a pension (other than the Centrelink pension) for services rendered to one or more of your former employers 1 (inside and outside Australia)? If YES please enter the information and comply with the instructions shown hereunder. Yes No

If Yes: From Where and Effective Date Where: _____ Date: __ / __ / ____

Kindly attach documentation showing the amount as on the first payment date of pension you are receiving or expecting to receive.

¹ E.g.: A private pension, superannuation fund, retirement savings account, etc.

C. Do you have any documents which confirm your residence in Australia during your working life?

Yes

No

If Yes, please bring documents to your local Centrelink Office with this form.

Note: Suitable documents are: group certificates; education certificates; reference from employer showing periods of employment; marriage certificate, birth certificate; birth certificate of any of your children born in Australia, naturalisation certificate; passport; any other document which may help to confirm your residence in Australia during your working life.

D. Please give details of persons who are not related to you and can confirm all or some of your residence in Australia during your working life. (e.g. employers, neighbours, co-workers etc.)

| Name and Surname | Address | Contact Number | Known for Period | |
|------------------|---------|----------------|------------------|------------|
| | | | From | To |
| | | | --/--/---- | --/--/---- |
| | | | --/--/---- | --/--/---- |
| | | | --/--/---- | --/--/---- |
| | | | --/--/---- | --/--/---- |

E. Please list all important personal events that occurred during your residence in Australia. This will help us verify your residence in Australia (e.g. name, place and date of birth of children; name, address and dates of employment; details of schools that children attended; names, addresses of property owned)

F. If a friend or relative helped you fill in this form, please give details

Name and Surname: _____

Address: _____

Contact Number: _____

