

This form allows you to authorise a person to act on your behalf. We call this person your NIISQ Agency nominee. Once completed, please email this form to [help@niis.qld.gov.au](mailto:help@niis.qld.gov.au).

## Having a NIISQ Agency nominee is optional

You do not have to have a NIISQ Agency nominee. We have made this form because some participants want their support people to be able to act on their behalf. If you have a NIISQ Agency nominee, you can still talk to us directly. All NIISQ Direct users must also understand and comply with the [NIISQ privacy policy](#).

If you decide that you don't want a NIISQ Agency nominee, you can change your mind at any time. If you change your mind and want to remove your NIISQ Agency nominee, you can send an email to [help@niis.qld.gov.au](mailto:help@niis.qld.gov.au) or you can contact your Support Planner.

All NIISQ Agency nominees are nominated for an initial 12 month period from the date of approval by the NIISQ Agency, or at the next MyPlan review (whichever comes first).

Your NIISQ Agency nominee will be able to act on your behalf for all matters including:



### Reimbursements

A NIISQ Agency nominee can ask for reimbursements for your treatment, care and support from the NIISQ Agency.



### My Plan

Your NIISQ Agency nominee will be able to access your full MyPlan including your:

- full name
- NIISQ case number
- approved services, including your therapy supports and medications, your service providers
- your goals, which may include information about your living situation, family members, interests, abilities and limitations
- participate in the development of your MyPlan
- update the NIISQ Agency on changes to your needs or life circumstances
- update the NIISQ Agency on changes to your personal contact details.

## NIISQ Agency nominee information

This part of the form should be completed by you.

Before completing this form, it is important that you know that:

- we assume that you are able to make your own decisions
- nominating another person to act on your behalf is voluntary
- we may check in to make sure that this is your decision, and that you haven't been pressured to appoint someone to act on your behalf
- in some cases, we may not allow someone to be nominated. This may include where there is a conflict of interest.

## Do any of the following apply to you:

Power of Attorney

QCAT Guardianship order

Enduring Power of Attorney

QCAT Administration order

None

## Your details

### Your name

First name

Middle name

Surname

### Your NIISQ case number

## NIISQ Agency nominee's details

### NIISQ Agency nominee's name

First name

Middle name

Surname

### NIISQ Agency nominee's street address

City/suburb

State

Postcode

### Is the NIISQ Agency nominee over the age of 18?

Yes

No

### NIISQ Agency nominee's relationship to you

### NIISQ Agency nominee phone number

### NIISQ Agency nominee email address

## NIISQ Agency nomination

I understand that:

- I can withdraw this nomination at any time by contacting [help@niis.qld.gov.au](mailto:help@niis.qld.gov.au) or by contacting my Support Planner
- I can contact the NIISQ Agency if I have any questions or concerns about my NIISQ Agency nominee arrangements
- I have read the [NIISQ privacy policy](#)
- I want to nominate the person identified above as my NIISQ Agency nominee
- I have spoken to my nominee and they have agreed to act on my behalf
- by submitting this form I acknowledge the above.

## Privacy statement

We are collecting your personal information to enable us to perform our functions under the NIISQ Act. We collect, use, disclose and store your personal information in accordance with the *Information Privacy Act 2009*, the NIISQ Act and *National Injury Insurance Scheme (Queensland) Regulation 2016* (NIISQ Regulation). If you want to know more about how we handle your personal information, you can read our privacy policy or contact our Privacy Officer on 1300 607 566 or [NIISQ-Privacy@niis.qld.gov.au](mailto:NIISQ-Privacy@niis.qld.gov.au).



Email the completed form to [help@niis.qld.gov.au](mailto:help@niis.qld.gov.au)

📞 1300 607 566 ✉️ [help@niis.qld.gov.au](mailto:help@niis.qld.gov.au)

**National Injury Insurance Agency, Queensland**