**Appendix A**

|  |
| --- |
| **AUTHORISED FIREARMS OFFICER AND USER FORM** |

*An authorised firearms user is any staff member or external experienced shooter who holds a relevant Firearms licence, who is authorised by the   
Head of School/Branch to use a University owned firearm (Staff) or Non University owned firearm (External experienced shooter) whilst on University related activities. Undergraduate students will not be authorised.*

|  |
| --- |
| **STAFF MEMBER DETAILS** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Staff ID number |  | | Surname | |  | |
| School/Branch |  | | Given names | |  | |
| Work contact number |  | | Mobile | |  | |
| **EXTERNAL SHOOTER DETAILS (Contractors)** | | | | | | |
| Company/Business/  Organisation Name | |  | | Surname | |  |
| Address | |  | | Given names | |  |
| Phone No. | |  | | Mobile | |  |
| **FIREARMS LICENCE DETAILS (Please attach a copy of the licence)** | | | | | | |

**For a Firearms Officer** only a valid South Australian Firearms Licence may be used which must match the classes and categories for the activities of the School/Branch.

**For other users**, the licence must be valid for the State where the activity is being conducted which must match the classes and categories for the activities to be undertaken.

|  |  |  |  |
| --- | --- | --- | --- |
| Firearms Licence No |  | Classes |  |
| Categories |  | Expiration |  |

|  |  |
| --- | --- |
| **PRIVATELY OWNED FIREARMS (For both internal and external users)** | |
| Firearms details and Serial Number(s) |  |

|  |
| --- |
| **AUTHORISATION (by Head of School/Branch)** |

I hereby authorise the above mentioned as a firearms user within the University of Adelaide to act in the following capacity until the expiration indicated below within the limitations of their firearms licence. I certify that I have sighted their current Firearms Licence and considered the appropriateness of both the categories and classes for which they are licenced.

|  |  |  |  |
| --- | --- | --- | --- |
| ❑ Firearms Officer  (Staff only) | ❑ Deputy Firearms Officer  (Staff only) | ❑ User  ❑ External User | Expiration of authorisation  Date / / |
| Name of Head of School/Branch |  | Signature | Date / / |

|  |  |  |  |
| --- | --- | --- | --- |
| **REVOKING AUTHORISATION (by Head of School/Branch)** | | | |
| **This authorisation is revoked for the following reason(s).** | | | |
| Name of Head of school/Branch |  | Signature | Date / / |

|  |
| --- |
| **INSTRUCTIONS** |
| **User**   * Attach a copy of your current Firearms licence(s) to this form. * Submit the completed form and a copy of Firearms licence(s) to the Firearms Officer. * Complete and submit a new form when your licence is renewed to the Firearms Officer.   **Firearms Officer**   * Forward the completed form to the Head of School/Branch for authorisation. * Following authorisation by the Head of School/Branch, forward a copy (i.e. scanned and sent electronically) to  (1) [Director, HSW](mailto:hswteam@adelaide.edu.au) and (2) Authorised User. * Add the users name and expiry to the School/Branch Training Plan * Register the form in the University records management system. |