

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 (Contrac | tors) | | | | |
| 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 | CI | asses | |
|---------------------|----|----------|--|
| Categories | E> | piration | |

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) | UserExternal User | Expiration | Expiration of authorisation | | | | |
|---|---|--|------------|-----------------------------|---|--|--|--|
| | | | Date | / | 1 | | | |
| Name of Head of | | Signature | | | | | | |
| School/Branch | | | Date | 1 | 1 | | | |
| REVOKING AUTHORISATION (by Head of School/Branch) This authorisation is revoked for the following reason(s). | | | | | | | | |
| Name of Head of school/Branch | | Signature | Date | 1 | 1 | | | |

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) <u>Director, HSW</u> 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.

 HSW Handbook
 Firearms Safety Management
 Effective Date:
 25 July 2018
 Version 3.1

 Authorised by
 Chief Operating Officer (University Operations)
 Review Date:
 25 July 2021
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 This process is uncontrolled when printed. The current version of this document is available on the HSW Website.
 Version 3.1