To: The Executive Officer Queensland Rifle Association P O Box 38 CARINA QLD 4152

COMPLAINT / APPEAL RESOLUTION FORM Course in Firearms Safety 10618NAT

I , (Full name)			
of (Address)			
Suburb/Town		State	Postcode
Phone	Mobile		
Email			
do hereby apply to the Executi	ve Officer, Qld Rifle Associatio	on Inc. to have my unresc	olved complaint/appeal, namely,
(list details of complaint)			
be reviewed under the Compla satisfactory resolution.	ints & Appeals - Section 8-8.1	and 8.2, in the Student	Handbook with a view to a
Course Date//	Course Location		
Name of Instructor			
Applicant's Signature		Date.	://///
	Office Us	se Only	
Complaint/Appeal Resolved:	YES / NO		
Reason for Decision:			
Evacutive Officer ORA Sign	natura		Date: / /