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

COMPLAINT / APPEAL RESOLUTION FORM

Firearms Safety Course 11029NAT

<i>I</i> , (Full name)	
Of (Address)	
Suburb/Town	State Postcode
Phone	Mobile
Email	
do hereby apply to the Executive Officer, Qld Rife	le Association Inc. to have my unresolved complaint/appeal, namely,
(list details of complaint)	
	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 Use Only
Complaint/Appeal Resolved: YES / NO	
Reason for Decision:	
Executive Officer QRA	
Sionature:	Date