



Australian Government
Australian Sports Commission

Application for Security Pass/Office Key

Please return form to ASC Security Section
PO Box 176, Belconnen ACT 2616
Ph (02) 6214 1616 Fax (02) 6214 1056
(Please PRINT all details – All signatures required)

To: Security Officer

From:

First Name: _____ Last Name: _____

Program: _____ Phone: (____) _____

Job Title: _____ Mobile _____

Email: _____

I understand that I will:

- Not allow any other person to use my pass or keys
- Report to ASC Security & Program Manager immediately if my pass or keys are lost or stolen
- Return my ID card and keys to Security on cessation of employment or access period at the ASC/AIS

My Status is:

ASC/AIS employed NSO OTHER: _____

And is:

Ongoing Casual Contract; which ends on ____/____/____

I hereby apply for an ID pass and Keys

Applicants Signature: _____ Dated ____/____/____

From the Delegate (see Authorised Delegate List)

I approve the issue of an ID pass and Keys as stated below and understand it is my responsibility to advise Security of a change of circumstances to the person above:

Access Details: _____

Keys Required - Key Number: _____ OR Lock Number: _____

Dining Hall Access: No Yes If Yes Cost Centre/Reference Number: _____

Name: _____ Signature: _____

Position: _____ Date: ____/____/____

Please bring this form to Security when requiring the ID pass.

To be completed by ASC Security section	
User Number: _____	Created by: _____
Date: ____/____/____	Security Officer Signature: _____
Signed Conditions of Use Form Sited - Y / N/A ID Issued - Y / N Key Issued - Y / N	