

SECTION 3: AUTHORISER ACCESS APPROVAL

Approved Authoriser Name:

Authoriser Signature:

Authoriser Contact Number:

Date:

SECTION 4: APPLICANT

In signing this form, you understand that it is your responsibility to:

- Ensure your Access Card and key/s are always kept safe and secure.
- Return the Access Card and key/s to HMRI Security when ceasing employment or study or other activity for which the Access Card or key/s have been provided, or if requested by HMRI Security.
- Report the loss of any Access Card or key/s to HMRI Security immediately.
- I acknowledge that the Access Card or key/s issued to me may be part of a Security or Master Key System (MKS). The loss of the Access Card or key/s may expose a significant part of the security system or key hierarchy to breach. I acknowledge that should such breach occur, I may incur costs.
- I must not assign or loan my Access Card or key/s to any other persons and that I must not obtain or attempt to obtain key duplicates.

Access Card received:

Key received:

Applicants Signature:

Date:

OFFICE USE - ENTRY

Inductions Completed:

Building	GSA	Laboratory	Clinical Trials	Bioresources	Imaging Centre (MRI)
<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No
<input type="checkbox"/> N/A		<input type="checkbox"/> N/A	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A

Photo Identification Sighted: Yes No

Photo type (License/Passport/Student ID):

Sighted by:

Security Officer Signature:

Research Database Team notified: affiliates@hmri.org.au

Monthly Report Updated for Space Management:

HMRI Security Approval:

Security Officer Name:

Signature:

Date:

OFFICE USE – EXIT

Exit date:

Has the applicant ceased employment or relocated to another location:

Ceased Relocated - JHH UON Calvary Mater

Items returned: Access Card Key/s

Access Card Deactivated: Key Register Updated:

Car parking: email to accounts@hmri.org.au to cease direct debit or payroll deduction

Sticker returned Yes No

Research Database Team notified: affiliates@hmri.org.au

Monthly Report Updated for Space Management: