Return fax: 4976 2309
Return email: laurenti@qal.com.au

QUEENSLAND ALUMINA LIMITED
A.C.N. 009 725 044

MARITIME INDUCTION / REINDUCTION AUTHORISATION FORM

COMPANY: _____ COMPANY MGT. CONTACT PERSON _____

TELEPHONE #: _____ Work Engaged in at QAL Wharf Facility Site (Describe): _____

θ New Induction θ Re-Induction (has current or near current QAL Access Badge) θ Change / Delete

- This form is to be completed by the Company Supervisor and be submitted to the Shipping Team before attendees can access the online induction / re-induction.
- QAL Site Pass always remains the property of QAL and must be returned to Security when no longer required.

EMAIL ADDRESS

Surname	Given Names *In Full & Preferred Name, ie, William Daniel (Bill)*	Job Classification *(e.g. Electrician, Engineer)*	Date of Birth	QAL Bdg. # if applicable	An email address must be supplied
MSIC CARD NUMBER:		EXPIRY DATE:			
MSIC CARD NUMBER:		EXPIRY DATE:			
MSIC CARD NUMBER:		EXPIRY DATE:			
MSIC CARD NUMBER:		EXPIRY DATE:			

COMPANY SUPERVISOR NOMINATING EMPLOYEE FOR WHARF ACCESS:

Signature **Print Name** **Date**

TELEPHONE #: _____

QAL SUPERINTENDENT SHIPPING APPROVING INDUCTION / RE-INDUCTION / WHARF ACCESS:

Signature **Print Name** **Date**