



RTO#1674

# 10618NAT – Course in Firearms Safety

*(approved for firearms licensing in Queensland)*

*Course delivered by On Target Training (Instructor: Alan Lawes)*



This course is a key part to obtaining your firearms licence in QLD ^  
Held in **MORANBAH** each month for

- ✓ Category AB (typically rifle)
- ✓ Category H (typically sporting pistol)

## Saturday course dates in 2021

20<sup>th</sup> February      06<sup>th</sup> March      13<sup>th</sup> March      15<sup>th</sup> May

Costs:      One category (AB or H) \$166  
                 Combined (ABH) \$186

*^ Note: persons 11 to 17 years of age may apply for a Minor's Licence.*

*A minor cannot acquire a firearm on this licence. Section 23 and 23(1)A of the Weapons Regulations 1996 provide guidelines for acquisition of a Minor's Licence.*

**Bookings essential. Contact for further information:**

**Lennon Training (07) 4982 0188 or [admin@lennontraining.com](mailto:admin@lennontraining.com)**

**Alan Lawes: 0430 129 143 or [ontargettraining2@gmail.com](mailto:ontargettraining2@gmail.com)**

### Notice to Club members:

On the above dates, from 12.30pm until approx. 4pm please welcome these trainees who will be conducting their practical at Range 5 at the Moranbah Pistol Club.  
*(They will be the ones wearing yellow safety vests)*



[WWW.lennontraining.com](http://WWW.lennontraining.com)



07 4982 0188



[admin@lennontraining.com](mailto:admin@lennontraining.com)



Lennon Training Emerald

**Qualification: 10618NAT Course in Firearms Safety**  
*(approved for firearms licensing in Queensland)*

**Descriptor:** This course is a pre-requisite by the Queensland Police Weapons Licensing Branch for acquiring a firearms licence and contains information about specific safety issues related to firearms and your responsibilities under relevant Queensland legislation.

The above course is open to all persons in Queensland seeking Weapons Act licence/s who are eligible to obtain such licence/s. Given the nature of the course, the requirement to handle firearms and understand the relevant legislation, Lennon Training have the below process in place.

These competencies comply with the Australian Qualifications Framework (AQF) and therefore, a nationally recognised statement of attainment will be issued on successful completion.

**Units of Competency within Qualification framework of accredited course 10618NAT:**

Schedule	Unit Type	Unit Code	Unit Title
Day 1	Core	WSCQPS001	Demonstrate knowledge of firearms legislation, firearms and community safety
Day 1	Elective	WSCQPS002	Demonstrate use of Category A and B firearms safely
Day 1	Elective	WSCQPS005	Demonstrate use of Category H firearms safely

**Assessment requirements:**

- Candidates must complete all assessment items to a satisfactory standard in order to be deemed competent. This may take the form of written, practical and/or interview.

**Overview of assessment:**

Unit Code	Unit Title	Example of Assessment Tasks
WSCQPS001	Demonstrate knowledge of firearms legislation, firearms and community safety	Multiple choice & short answer assessment Practical demonstration to the Facilitator
WSCQPS002	Demonstrate use of Category A and B firearms safely	Multiple choice & short answer assessment Practical demonstration to the Facilitator
WSCQPS005	Demonstrate use of Category H firearms safely	Multiple choice & short answer assessment Practical demonstration to the Facilitator

**LLN entry requirements:** Level 2 as outlined on page 15 of this information guide. A scribe is available for assistance **BUT MUST BE BOOKED AHEAD**. Please contact our office should you require this service.

**Pre-requisites:**

- Complete the pre-enrolment eligibility (Form 33) and the booking enrolment form available from either Lennon Training or On Target Training
- Physical ability
- Effective communication

**Vocational outcome:** pending genuine reason for acquiring licence

**Useful link for more information about the Queensland Weapons Licensing Branch:**

<http://www.police.qld.gov.au/programs/weaponsLicensing/>

## Enrolment Application

**Instructor: Alan Lawes (signature)..... Date:.....**

**COURSE DETAILS Upon successful completion, you may be issued the following:**

Occasionally for the purposes of training, monitoring compliance or to enhance safety and educational messages, the digital recording may be undertaken during class. Such data will be used by Lennon Training exclusively. If you do not give approval to be recorded, please indicate here

**Course:** Moranbah Firearms Safety course  
**Unit/s:** \$186 (inc \$3.10 gst) (Category ABH) WSCQPS001; WSCQPS002 & WSCQPS005  
 \$166 (inc \$3.10 gst) (Category AB) WSCQPS001 & WSCQPS002  
 \$166 (inc \$3.10 gst) (Category H) WSCQPS001 & WSCQPS005  
**Qual:** in partial completion of **10618NAT Course in Firearm Safety (approved for firearms licensing in Queensland)**

**Section 1 – PAYMENT DETAILS Check these details & update as required**

Address for tax invoice:  
(list Property or PO Box if applicable): .....

**Section 2 – YOUR DETAILS Name to match ID. Check your details & update as required**

Gender (circle): Male Female Other

First name: .....

Middle name (optional): .....

Surname/Family name: .....

Unique Student Identifier (USI)?

*This will be 10 characters long & you would have created it at [www.usi.gov.au](http://www.usi.gov.au)*

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Date of birth (dd/mm/yy): .....

Your contact phone: .....

Your usual residential address (use your Street address, Suburb/Town, State, Postcode. This is not your PO Box): .....

**Certs are issued electronically upon supply of valid USI & payment terms being met.**

Primary email address/es: .....

Is there anyone else to be included? -----

**For each question below circle or tick response that best describes you. Provide additional information as required**

Were you born in Australia?  
 Yes No If no; which country? -----

Are you of Aboriginal or Torres Strait Islander origin?  
 No Yes (Both) Yes (Aboriginal) Yes (Torres Strait Islander)

At home, do you speak a language other than English?  
 No Yes If yes; specify main language -----

What is your highest completed school level? Circle response  
 Still at school Year 12 Year 11 Year 10 Year 9 or equivalent Year 8 or equivalent Did not go to School

## Enrolment Application

Have you successfully completed any of the listed qualifications?

- |     |                  |   |   |   |
|-----|------------------|---|---|---|
| No  | If yes, tick ANY | <input type="checkbox"/> Bachelor or higher degree            | <input type="checkbox"/> Cert IV (or advanced certificate/technician) | <input type="checkbox"/> Certificate II |
| Yes | applicable =>    | <input type="checkbox"/> Advanced diploma or associate degree | <input type="checkbox"/> Cert III (or trade cert)                     | <input type="checkbox"/> Certificate I  |
|     |                  | <input type="checkbox"/> Diploma (or associate diploma)       | <input type="checkbox"/> Other, inc International                     |   |

Of the following categories, which best describes your current employment status?

- |   |  |
|---|--|
| <input type="checkbox"/> Full-time employee                   | <input type="checkbox"/> Employed – unpaid worker in a family business |
| <input type="checkbox"/> Part-time employee                   | <input type="checkbox"/> Not employed – not seeking employment         |
| <input type="checkbox"/> Self employed – not employing others | <input type="checkbox"/> Unemployed – seeking full-time work           |
| <input type="checkbox"/> Self employed – employing others     | <input type="checkbox"/> Unemployed – seeking part-time work           |

Of the following categories, which best describes the main reason you are undertaking this course (Tick ONE box only)

- |   |  |
|---|--|
| <input type="checkbox"/> To get a job                     | <input type="checkbox"/> It was a requirement of my job            |
| <input type="checkbox"/> To develop my existing business  | <input type="checkbox"/> I wanted extra skills for my job          |
| <input type="checkbox"/> To try for a different career    | <input type="checkbox"/> To get into another course of student     |
| <input type="checkbox"/> To get a better job or promotion | <input type="checkbox"/> For personal interest or self-development |
|   | <input type="checkbox"/> Other reasons                             |

Do you consider yourself to have a disability, impairment or long term condition? Refer disability supplement if explanation required

- |    |                  |                                       |  |  |                                |
|----|------------------|---------------------------------------|--|--|--------------------------------|
| No | If yes, tick ANY | <input type="checkbox"/> hearing/deaf | <input type="checkbox"/> vision            | <input type="checkbox"/> intellectual              | <input type="checkbox"/> other |
|    | applicable =>    | <input type="checkbox"/> learning     | <input type="checkbox"/> mental            | <input type="checkbox"/> acquired brain impairment |                                |
|    |                  | <input type="checkbox"/> physical     | <input type="checkbox"/> medical condition |  |                                |

### Section 3 – STUDENT DECLARATION

I recognise that it is my responsibility to provide all necessary documentary evidence relevant to the above-mentioned training. I authorise the issuing organisation to verify with Lennon Training the authenticity of any qualification I have submitted to Lennon Training as part of my application.

I declare that the information I have provided to the best of my knowledge is true and correct.

I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice (see below)

.....  
Applicant's signature ...../...../.....  
Today's Date

.....  
Parent/Guardian signature (for applicants under 18 years) ...../...../.....  
Today's Date

### Section 4 – PRIVACY NOTICE

Under the *Data Provision Requirements 2012*, Lennon Training is required to collect personal information about and to disclose that personal information to the National Centre for Vocation Education Research Ltd (NCVER).

Your personal information (including the personal information contained on this enrolment form and your training activity data) may be used or disclosed by Lennon Training for statistical, regulatory and research purposes. Lennon Training may disclose your personal information for these purposes to third parties, including:

- School – if you are a secondary student undertaking VET, including a school-based apprenticeship or traineeship;
- Employer – if you are enrolled in training paid by your employer;
- Commonwealth and State or Territory government departments and authorised agencies;
- NCVER;
- Organisations conducting student surveys; and
- Researchers

Personal information disclosed to NCVER may be used or disclosed for the following purposes:

- issuing a VET Statement of Attainment or VET Qualification, and populating Authenticated VET Transcripts;
- facilitating statistics and research relating to education, including surveys;
- understanding how the VET market operates, for policy, workforce planning and consumer information, and
- administering VET, including program administration, regulation, monitoring and evaluation.

You may receive an NCVER student survey which may be administered by an NCVER employee, agent or third party contractor. You may opt out of the survey at the time of being contacted.

NCVER will collect, hold, use and disclose your personal information in accordance with the *Privacy Act 1988* (Cth), the VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at [www.ncver.edu.au](http://www.ncver.edu.au))

FORM 33

QUEENSLAND  
Weapons Act 1990  
Section 53

DECLARATION BY UNAUTHORISED PERSON FOR USE  
OF A WEAPON AT AN APPROVED RANGE

Ver. 3 — 07/04/09  
Δ2

1. PERSONAL DETAILS

Please use  
**BLOCK LETTERS**

Provide details  
and supporting  
evidence if your  
name has changed  
due to:  
• marriage  
• deed poll, etc.

Family name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Given name(s)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>														
	Day		Month		Year																	
Town of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Drive licence no.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

2. RESIDENTIAL DETAILS

Do not use PO Box for  
residential address.

Lot on plan (RP No.)  
can be found on rates  
notice.

<b>Current address</b>																						
Property name/ Lot on plan	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street number and name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb/Locality	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
State	<input type="text"/>	<input type="text"/>	<input type="text"/>	Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	How long have you lived at this address?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Years	Months					
<b>Postal Address (if different from above)</b>																						
Postal address (e.g. PO Box)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb/Locality	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
State	<input type="text"/>	<input type="text"/>	<input type="text"/>	Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>														

3. WEAPONS LICENCE DETAILS

Only complete if  
you currently hold a  
weapons licence.

Licence no	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>														
	(Only one required)																						
Date issued	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Expiry date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Day	Month	Year	Day	Month	Year

4. UNLICENSED PERSON

Only complete if  
you do not hold a  
weapons licence.

Have you in Queensland or elsewhere been convicted of: • murder or manslaughter; or • armed robbery; or • unlawful wounding; or • grievous bodily harm; or • an offence involving drugs, weapons or violence that is prescribed under a regulation punishable by at least 7 years imprisonment.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you in the last 5 years, been convicted of, or discharged from custody on sentence after being convicted of any of the following? • offence relating to the misuse of drugs; • offence involving the use or threatened use of violence; • offence involving the use, carriage, discharge or possession of a weapon.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you in the last 5 years been subject to a domestic violence order, other than a temporary protection order?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you currently subject to a temporary protection order?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you prevented by an order of a Queensland or another court outside of Queensland from holding a licence or possessing a weapon unless the order permits such under supervision?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you in the last 5 years been subject to an involuntary assessment order under the <i>Mental Health Act 2000</i> , or similar order under the <i>Mental Health Act 1974</i> , or a similar order in another state?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been refused a licence or has your licence been revoked in the last 5 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has your licence been suspended?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

