



Application for use of end of trip facilities

Submit form	Via email: EndofTripFacilities@epw.qld.gov.au If you have any questions, please contact Accommodation Office on phone (07) 3008 2750.	
Building address		
Applicant contact details	Full name	Gender
	Work phone or mobile	Email address
	Department (eg. EPW)	Employee status
	Human Resources contact (phone number or email)	Employee number
	Current place of employment (building address)	
Desired access type	Have you completed the Emergency Procedures Induction for the Building? <input type="checkbox"/> No <input type="checkbox"/> Yes	
	Would you like to be wait-listed for a locker? <input type="checkbox"/> No <input type="checkbox"/> Yes	
	Do you have an existing access card for the building? <input type="checkbox"/> No <input type="checkbox"/> Yes	
	Access card number (if answered yes)	
	Do you require access for storage of a	
Agreement		

I have read the **terms and conditions** of use of the End of Trip Facilities.

I have read the **Code of Conduct** for the Queensland Public Service.

I hereby confirm that I agree to be bound by the terms and conditions of use of the End of Trip Facilities and that I will comply with the Code of Conduct for the Queensland Public Service upon being granted access to the facilities.

Signature

Date

Privacy Note: The Department of Energy and Public Works is collecting information on this application, including your personal information, for the purpose of assessing your application for Use of End Trip Facilities and monitoring use of the End of Trip Facilities, if access is granted. The information may be used by the use of the Department of Energy and Public Works, State Government Security officers and building management. This information will not be passed on or disclosed to any other third parties, without your consent, unless authorised or required by law.

For completion by End of Trip Facilitator			
Application approved and emailed to Security and applicant	<input type="checkbox"/> No <input type="checkbox"/> Yes	Departmental Facilities approval required	<input type="checkbox"/> No <input type="checkbox"/> Yes
Locker number allocated	<input type="text"/>	Added to wait list	<input type="checkbox"/> No <input type="checkbox"/> Yes

For completion by security			
New access card	<input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, card number	<input type="text"/>
Updated existing access card	<input type="checkbox"/> No <input type="checkbox"/> Yes	Government or other suitable photo ID sighted	<input type="checkbox"/> No <input type="checkbox"/> Yes