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| **UAPS File #** | | | | | | |
| **Firearms Acquisition or Disposition Form** | | | | | | | | | | | | | | | | | | | | | | | |
| Acquisition 🞎 | | | | | | | | | | Disposition 🞎 | | | | | | | | | | | | | |
| **1. Purchasing Information** | | | | | | | | | | | | | | | | | | | | | | | |
| Faculty/Unit Name | | Speed Code | | | | | | | | | | | | | Account Number | | | | | | | | |
| Possession and Acquisition License (PAL) 🞎  Possession Only License (POL) 🞎 | | | | | | | | | PAL Number:  POL Number: | | | | | | | | | | | Expiry date: | | | |
| Email: | | | | | | | | | Phone: | | | | | | | | | | | | | | |
| **Reason for acquisition or disposition:** | | | | | | | | | | | | | | | | | | | | | | | |
| **2. Firearm Specifications** | | | | | | | | | | | | | | | | | | | | | | | |
| Name/Make | Pump  🞎 | | | Bolt   🞎 | | | | Lever   🞎 | | | | | Single/shot   🞎 | | | Semi Auto   🞎 | | | | | Other | | |
| Model and Caliber | Rifle  🞎 | | | | | | | Shotgun   🞎 | | | | | Handgun   🞎 | | | Tranquilizer Gun🞎 | | | | | Other  🞎 | | |
| Ammunition Type |  | | | | | | | | | | | | | | | | | | | | | | |
| Case | Locking Hard Case 🞎 | | | | | | | | | | | Soft Case🞎 | | | | | | | | | | | |
| Other Equip: | Sling   🞎 | | | | Trigger Lock   🞎 | | | | | | | Cleaning Kit   🞎 | | | | | | | Holster  🞎 | | | Ammo Pouch  🞎 | |
| **3. Approval of Firearm Acquisition**: *(Pursuant to the University of Alberta Firearms Policy, the approval to purchase a firearm cannot be delegated.)* | | | | | | | | | | | | | | | | | | | | | | | |
| Faculty Dean/Unit Director | | | | | | | | | | | | | | Signature | | | | | | | Date | | |
| Protective Services Firearms Officer  Sgt. Tony Thomsen | | | | | | Signature | | | | | | | | | | | | | REG # | | | | Date |
| **4. Approval for Firearm Disposition or Continuing Need:** *(University of Alberta Protective Services will monitor the frequency of use of all University firearms. Firearms not used for five years will be subject to a needs assessment with input from the responsible department. Appropriate action to dispose of the firearm will be taken when the needs assessment indicates the firearm is no longer required.)* | | | | | | | | | | | | | | | | | | | | | | | |
| Retain for further use 🞎  May be disposed of: 🞎  Faculty Dean/Unit Director: | | | | | | | | | | | Date: | | | | | | | | | | | | |
| Date Disposed of: | | | Protective Services Authorizing Signature | | | | | | | | | | | | | | | REG # | | | | | |
| Reason for Disposition: | | | | | | | | | | | How disposed of: | | | | | | | | | | | | |
| Disposed by: | | | | | | | Date: | | | | | | | | | | | | | REG # : | | | |
| **Custodian In Charge of Firearm:** | | | | | | | | | | | | | | | | | | | | | | | |