



DASR Query Form

Query

*Fields in **RED** are mandatory. This form is to be used for queries related to the clarification, interpretation or implementation of the DASR*

1. Initiator's Section

Response required by

Supporting Documents Attached?

Brief Summary of query

Initiator Name	Rank or Title	Organisation	Phone / Mobile
Email			Date

2. Query Endorsement (Minimum MAJ (E) / APS6 / Contractor QM or RM)

Comments (DQF initiators may sign this section if their rank is equivalent or above MAJ / LCDR / SQNLDR / APS6 / QM or RM)

Endorser Name	Rank or Title	Organisation	Phone / Mobile
Email		Signature	

Contractors Only: Have engaged with contract manager?

DASA Use Only

3. DQF Registration

DQF Registration Number	Supporting Documents
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4. Assessment, Response and Further Actions

Query Topic:

Assessment and response

Does further action need to be taken? (i.e. regulation change, FAQ release, AC, etc)

Instruction for further actions

Name - Response prepared by

Rank or title

Name - Response approved by

Rank or title

Appointment

Attach documents here

Approver's signature

*DASA Delegate** - DASA response must be reviewed and signed by authorised personnel IAW "BUS 06-004 DASA Delegation Release Authorisation"*