APPLICATION FOR WAIVER OR REDUCTION OF FILING FEE FOR APPLICATIONS FOR RELIEF FROM UNFAIR DISMISSAL
(Section 84, *Industrial Relations Act 1996*)

Under the *Industrial Relations (General) Regulation 1996* made pursuant to the *Industrial Relations Act 1996*, the Industrial Registrar may waive payment of, or reduce, the lodgement fee for applications for relief from unfair dismissal filed pursuant to section 84 of the Act, where the Registrar is satisfied that the applicant will "suffer financial hardship if required to pay the fee".

The Industrial Registrar, Deputy Industrial Registrar or Assistant Deputy Industrial Registrar will consider an application to waive or reduce the fee as a matter of priority. Where possible you will be advised verbally of the decision. Where the application for waiver or reduction is unsuccessful, you will be required to pay the lodgement fee immediately.

Please note that your application for relief from unfair dismissal can only be accepted where the lodgement fee (including any reduced fee determined by the Registrar) is paid, or such fee has been waived.

PERSONAL DETAILS OF THE EMPLOYEE (APPLICANT)	
1. Name	Family Name ……..…….. Given Names …..……
2. Postal Address	 Suburb: Postcode:
3. Telephone Fax:	( ) ( )

4. If you hold one of the listed cards, are in receipt of Legal Aid or under 18 years, you are automatically exempt from paying the filing fee. If not, please go to question 6 and complete the application for a waiver.	I currently hold one of the following cards: ☐ Health Care Card ☐ Health Benefit Card ☐ Pensioner Concession Card ☐ Commonwealth Seniors Health Card ☐ Any other card issued by Centrelink or the Department of Veterans'Affairs that certifies entitlement to Commonwealth health concessions OR ☐ I am in receipt of Legal Aid ☐ I am a person under 18 years Benefit card to be sighted by Registry Staff (photocopy accepted)
5. Signature	…… Signature of applicant Date:
6. Dependants	Do you have any dependants in your care? Yes ☐ No ☐

PROOF OF FINANCIAL HARDSHIP

7. Income	**Income from Employment** A. Lump sum Please provide details of any moneys you received as final payment from the employer against whom you are claiming relief from unfair dismissal: Salary (net) $_____ Termination payment $_____

	B. Other payments Do you receive income from any other employment (ie, other than that which you are claiming relief from unfair dismissal), fees for contractual arrangements etc? Yes ☐ No ☐ _____ SUMMARY OF INCOME The total amount of income I receive per fortnight is as follows: 1. Income from employment (Lump sum plus other payments) $_____ 2. Other Income $_____ TOTAL $_____
9. Assets	Please provide an estimate of the amounts held by you in any bank account TOTAL $_____
10. Liabilities	Type of liability (eg credit card) Outstanding balance _____ $_____ _____ $_____ _____ $_____ TOTAL $_____

11. OTHER COMMENTS

If necessary, please include any other information and/or comments about your circumstances which you believe should be taken into account in considering your application.

FOR REGISTRY USE ONLY	
	☐ APPROVED ☐ NOT APPROVED
IF APPROVED	
FEE	☐ WAIVED IN FULL ☐ REDUCED TO $……..
This application has/has not been approved pursuant to Clause 20(6) of the *Industrial Relations (General) Regulation 1996*. …….. **ASSISTANT/DEPUTY/INDUSTRIAL REGISTRAR** Date:	