Form 43A

WITNESS STATEMENT OF [NAME] [DATE]

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| **COMMISSION DETAILS** |  |
| Industrial Relations Commission of New South Wales | |
| Case number |  |
| **TITLE OF PROCEEDINGS** |  |
| Appellant/Applicant/Notifier/ | **[name]** |
| Respondent | **[name]** |
| **FILING DETAILS** |  |
| Filed for | **Appellant/Applicant/Notifier/ or Respondent [choose one]** |
| #Representative | [Name of representative] [industrial organisation or firm] |
| Contact address | [address] |
| Contact name and number | [name] [telephone] |
| Contact email | [email address] |

2

[on separate page]

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| **WITNESS STATEMENT** |
| Name |
| Address |
| Occupation |
| Date |
| I state:   1. #I am [role of witness]. 2. [state information to be included in the witness statement in numbered paragraphs] |
| Signature of witness |