

UNFAIR DISMISSAL APPLICATION

COMMISSION DETAILS

Industrial Relations Commission of New South Wales

Case number

TITLE OF PROCEEDINGS

Applicant [name]

Respondent (Employer) [name]

FILING DETAILS

Filed for **Applicant**

#Representative [Name of representative] [industrial organisation or firm]

Applicant's home address [address]

Contact number [telephone]

Contact email [email address]

Respondent contact name, telephone and email [name] [telephone] [email]

LISTING DETAILS

The parties will be advised of the date, time and place when the Commission will hear this Application. Any enquiries should be made to the Industrial Relations Commission List Clerk, telephone 02 8688 3516.

If the respondent does not enter an appearance when this matter is listed before the Commission, or if there is no attendance by a party or their counsel, solicitor or agent at the time and place as notified to the parties, the proceedings may be heard in their absence and an order may be made against the party who fails to attend.

DETAILS OF EMPLOYMENT

Nature of employment State public sector employee
 Local government employee
 Not known

Employer's name [name]

Place of work [address]

Position/occupation [job/type of work performed for employer]

Award or enterprise agreement applying to your employment [name of award or enterprise agreement]

Type of employment Full-time
 Part-time
 Casual

Date employment commenced [date]

Date of dismissal or threatened dismissal [date]

Last day of work if different to date of dismissal [date]

Normal gross (before tax) pay each week [amount]

Non-wage benefits (e.g. private use of a car) [insert if applicable]

REMEDY

What remedy are you seeking? Reinstatement
 Re-employment
 Compensation

If you are seeking re-employment (rather than reinstatement), what job/position are you seeking? [job/position]

If you are seeking compensation, what amount do you seek? [amount]

REASONS FOR APPLICATION

Why do you say your dismissal (or threatened dismissal) was harsh, unreasonable or unjust? Please **be brief** – you will have the opportunity to provide more details to the Commission at the conciliation conference and during any arbitration.

1 []

2 []

Note: You should attach to this application a copy of any letter or other relevant document that sets out any reasons for your dismissal or threatened dismissal.

LATE APPLICATION (if applicable)

Is this application being filed more than 21 days after the date on which you believe you were dismissed? Yes
 No

If yes, what are the reasons for the application being filed late? [reasons]

SIGNATURE

#Signature of or on behalf of
Applicant

Capacity [eg solicitor, authorised officer of industrial
organisation]

Date of signature [date]

NOTES

1. This application must be made no later than **21 days** after the date of dismissal. The Commission may accept an out of time application if it considers that there is sufficient reason to do so. If the application was filed any later than within 21 days of the date of dismissal, the Commission will determine whether you should have permission to continue with the claim.
2. Not all employees can make an Unfair Dismissal Application under Pt 6 of the *Industrial Relations Act 1996*. Check that you are eligible before you file this application. For example, you are **not** eligible to bring a claim if you are:
 - (1) employed by a private sector employer;
 - (2) an employee engaged under a contract of employment for a specified period of time, if the specified period is less than 6 months;
 - (3) an employee engaged under a contract of employment for a specific task;
 - (4) an employee engaged on probation where the probationary period was determined in advance and was of 3 months duration or less;
 - (5) employed on a casual basis for a short period; or
 - (6) not a public sector employee **and** your conditions of employment are not set by an industrial instrument **and** your annual remuneration is greater than that stipulated in cl 5 of the Industrial Relations (General) Regulation 2020 or its successor.
3. You are required to pay a filing fee to lodge your application, unless the Industrial Registrar decides to waive that fee after being satisfied, upon your application, that being required to pay the fee would cause you financial hardship.
4. You must serve a copy of this application on the respondent.
5. You will be advised of the date for a conciliation conference before a member of the Commission. You should personally attend the conciliation conference. If you are unable to attend in person you may apply to have the conciliation conducted by videoconference or teleconference.

6. Please ensure that when you attend for the conciliation conference you are prepared to discuss the matter and the question of settlement. You should bring with you any relevant documents that you have concerning your dismissal.
7. You should be willing to have discussions with the respondent prior to the conciliation with a view to settling the claim.
8. Please ensure that you have completed all of the details in this form carefully. The information you provide in this form must be true and correct to the best of your knowledge and belief.

COMPLIANCE WITH PRACTICE NOTES

Parties must comply with the Practice Notes of the Commission. The Practice Notes may be found at the following website: <https://www.irc.nsw.gov.au/irc/practice-and-procedures/practice-notes.html>.

REGISTRY ADDRESS

Street address	Industrial Relations Commission Level 10, 10 Smith Street Parramatta NSW 2150
Postal address	PO Box 927 Parramatta NSW 2124
Telephone	02 8688 3516