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Form 4

Application for joining controlling third party to personal grievance

*Section 103B, Employment Relations Act 2000*

Between

*Full name of Applicant…………………………………………………………………………………………*

*Address…………………………………………………………………………………………………………..*

*……………………………………………………………………………………………………………………..*

*Telephone number……………………………………………………………………………………………….*

*Email address* ……………………………………………………………………………………………………

And

*Full name of Respondent*……………………………………………………………………………………….

*Address…………………………………………………………………………………………………………..*

*……………………………………………………………………………………………………………………..*

*Telephone number……………………………………………………………………………….....................*

*Email address* …………………………………………………………………………………………………….

**To** the Employment Relations Authority

and

**To** the applicant/the respondent\*

\*Select one or omit if application is lodged jointly by both the applicant and the respondent

and

**To** the third party

*Full name of third party*……………………………………………………………………………………….

*Address…………………………………………………………………………………………………………..*

*……………………………………………………………………………………………………………………..*

*Telephone number……………………………………………………………………………….....................*

*Email address* …………………………………………………………………………………………………….

**Application to join third party to proceedings to resolve personal grievance**

1 The applicant/respondent/applicant and respondent\* apply/applies\* to the Employment Relations Authority to join the third party (named above) to the above-mentioned proceedings to resolve a personal grievance.

 \*Select one.

**Grounds**

2 This application is made on the following grounds:

1. the third party named in this application is a controlling third party (within the meaning given to that term in section 5 of the Employment Relations Act 2000) for the following reasons: [*state details fully, fairly, and clearly*].

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

1. the personal grievance in question relates to an action that occurred while the employee was working under the control or direction of the third party: [*state details fully, fairly, and clearly*].

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

1. the third party’s actions caused or contributed to the personal grievance referred to above, for the following reasons: [*state details fully, fairly, and clearly*].

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

**Notification**

3 Have you notified the third party about the matters described in paragraph 2? Yes/No\*

\*Select one.

If the answer to this question is “Yes”, please state the following:

(a) the date on which the action alleged to amount to a personal grievance occurred or came to the notice of the employee (if known):

(b) the date on which the relevant personal grievance was raised with the employer:

(c) the date on which the third party was notified:

(d) whether the third party was notified within the relevant 90-day notification period (see section 115A(6) of the Employment Relations Act 2000): Yes/No\*

\*Select one.

**Supporting documents**

4 I/We\* attach the following documents that I think are relevant to the problem or matter: [*list all the documents that you wish to rely on or refer to in making this application and attach them to this application*].

 \*Select one.

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

**Address for service**

5 This application is lodged by *[full name of applicant or applicant’s representative*]/[*full name of respondent or respondent’s representative*]/[*full name of applicant or applicant’s representative and full name of respondent or respondent’s representative*]\* …………………………………………………………………………………………………

\*Select one.

6 The address for service of the person/persons\* who lodged this application is [*full physical or postal address to which any document may be sent*] ………………………………………………………………………………………………, telephone number is ………………………………………………………………………………………………, and email address for service is ……………………………………………………………………………………………….†

\*Select one

†A full physical address, a telephone number, and an email address must always be supplied.

Date: ……………………………………………

Signature(s):……………………………………….

(applicant/applicant’s representative/respondent/respondent’s representative\* applying to join third party to personal grievance proceedings)

|  |
| --- |
| \*Select each that applies. |

Notice to respondent

1 If you intend to respond to this application, you must, within 14 days after the date of the service of this application on you, lodge a statement in reply with an officer of the Employment Relations Authority.

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2 The term **days** does not include any day in the period beginning with 25 December in any year and ending with 5 January in the following year.

3 After considering this application and any statement in reply, the Authority may decide to join you to the proceedings to resolve the personal grievance referred to in this application. If the Authority decides to do so,—

(a) all parties may be directed to mediation; but

(b) if the matter is not resolved through mediation, you will be notified of the place, date, and time at which the Authority will conduct any investigation meeting in respect of these proceedings..

Date: ……………………………………………

Signature:……………………………………….

 (Officer of the Employment Relations Authority)