


Industrial Tribunals and The Fair Employment Tribunal Northern Ireland



Making a claim to an Industrial Tribunal and/or The Fair Employment Tribunal in Northern Ireland

This form is intended for use by claimants who wish to make a claim to an Industrial Tribunal and/or the Fair Employment Tribunal in Northern Ireland.

New claimants wishing to make a claim in England, Wales or Scotland should apply to the Employment Tribunal Service in Great Britain, using the form that they provide.

Before you fill in this form make sure that you:

- **Consider the conciliation service offered by the Labour Relations Agency (LRA).** On 3rd April 2011 the LRA published a **new Code of Practice** on disciplinary and grievance procedures for new complaints after that date. To compliment the Code of Practice a new process known as **Pre-Claim Conciliation** has been introduced which aims to assist all parties to an employment complaint find an acceptable solution that means that there is no need for the matter to be brought to a tribunal. If you opt to use this service, you should contact the LRA (Tel: 028 9032 1442) and they will put you in contact with a Conciliation Officer, who will explain this service and answer any questions that you might have.
- read the notes that came with this form on how to fill it in. **Pay particular attention to time limits;** if we don't receive your claim on time, it usually won't be accepted;
- consider whether or not you need to take advice, particularly if your claim involves discrimination.

To make your claim on-line visit our website www.employmenttribunalsni.co.uk. When you make your claim on-line, receipt will be acknowledged electronically, there is no need to send a hard copy by fax or post.

How to fill in this claim form

By law, you **must** provide the information marked with ★ and, if it is relevant, the information marked with ●

- Please make sure that all the information you give is as accurate as possible.
- Please use black ink as we have to photocopy the form.
- Please write clearly and use CAPITAL letters for names and addresses.
- If you are sending your claim electronically or by fax there is no need to send a copy in the post.
- Where there are tick boxes, please tick the one that applies.
- If you have a representative acting for you, correspondence will be sent to him/her and not to you.
- If your complaint includes a claim of unlawful discrimination on grounds of religious belief or political opinion, we will regard this as a claim to the Fair Employment Tribunal which deals with unlawful discrimination on these grounds.
- Two or more claimants may present their claims using the same form if their claims arise out of the same set of facts.
- * with certain exceptions - if you are bringing a levy appeal, an appeal against a health and safety or non-discrimination notice, or an appeal against the Gangmasters Licensing Regulations you should fill in section 1 and, where appropriate, section 2, giving the grounds for your appeal in section 7.

Claim to an Industrial Tribunal and/or The Fair Employment Tribunal (in Northern Ireland)

FOR OFFICE USE	
Case number: (Industrial Tribunal)	Case number: (Fair Employment Tribunal)

1 Claimant details

1.1 Title (if 'Other', please indicate): **Mr** **Mrs** **Miss** **Ms** **Other**

1.2★ First name(s):

1.3★ Surname or family name:

1.4● Date of birth: **Day** - **Month** - **Year**

Are you: male? female?

1.5★ Address:

No.:

Street:

Town / City:

County:

Post code:

1.6 National Insurance Number

1.7 Contact details:
**(where we can contact you
during normal working hours)**

Tel. (Day):

Mobile No:

Fax:

E-mail:

2 Respondent's details

2.1 ★ Give the name of the employer, organisation or person you are complaining about (the respondent). (If you are complaining about more than one respondent, give additional details at **2.5** below).

2.2★ Address:

No.:

Street:

Town / City:

County:

Post code:

2.3 Telephone number:

2.4 If you worked at an address different from the one you have given at **2.2**, please give the full address.

2.5● If your complaint is against more than one respondent please give their names and addresses. (It would be helpful if you could give postal codes and phone numbers here if known).

3 Your representative

Please fill in this section only if an individual or organisation has agreed to represent you. If you have appointed a representative, we will only send correspondence to them, except for the notice of hearing and your own copy of the tribunal's decision.

3.1 Representative's name:

3.2 Name of representative's organisation:

3.3 Address:

No.:

Street:

Town/City:

County:

Post code:

3.4 Contact details: Tel. (Day):

Tel. (other):

Fax:

E-mail:

4 Trade Union Membership

4.1 Are you a member of a trade union? Yes No

4.2 If 'Yes', please give its name

5 Employment details

Please complete this section if you are or were an employee of the respondent or a worker providing services to the respondent.

- 5.1★ What is or was your relationship to the respondent?
- (a) Employee under a contract of employment
- (b) Worker providing services
- (c) Other. (If none of the above, what was your relationship to the respondent?)

5.2 Please give the following details if possible.

Date when your employment started - -

Is your employment continuing? Yes No

Date when your employment ended or will end - -

5.3 Please say what job you do or did. If this does not apply, please say what your connection was with the respondent.

6 Earnings and benefits

6.1 How many basic hours do or did you have to work each week? hours each week

6.2 How much are or were you usually paid?

Pay before tax £ each hour week month

Normal take-home pay
(including overtime, commission,
bonuses etc.). £ each hour week month

6.3 If your employment has ended, did you work (or were you paid for) a period of notice? Yes No N/A

If 'Yes', how many weeks or months notice did you work or were you paid for? weeks months

6.4 Are you or were you in your employer's pension scheme? Yes No

6 Earnings and benefits (continued)

6.5 If you receive or received any other benefits from your employer, please give details.

6.6 If you have left your employment, have you since got another job? (if necessary, use section 8 to give more detail) Yes No N/A

6.7 If you answered 'Yes' to **6.6**, please say when you started (or will start) work.

6.8 If you answered 'Yes' to **6.6** and the job is temporary, please tell us when it likely to end.

6.9 Please say how much you are now earning before tax

Normal take-home pay (including overtime, commission, bonuses etc).

6.10 If your employment has ended, have you claimed Jobseeker's Allowance, Income Support or Income Related Employment and Support Allowance since your employment ended? Yes No N/A

If 'Yes', please give details.

6.11 Please say what remedy you want if your case is successful at a tribunal. (Tick the box that applies).

(a) To get your old job back and compensation (reinstatement)

(b) To get another job with the same employer and compensation (re-engagement)

(c) Compensation only

7 Details of your claim

7.1★ Please tick the box(es) to indicate the type of complaint you wish the tribunal to consider.

- (a) I was unfairly dismissed (including constructive dismissal)
- (b) I am claiming a redundancy payment

(c) I am claiming that I am owed the following amounts in respect of:-

Notice Pay	<input type="checkbox"/>	£	Holiday Pay	<input type="checkbox"/>	£
Arrears of pay	<input type="checkbox"/>	£	Breach of contract	<input type="checkbox"/>	£
Other Payments (please specify)	<input type="checkbox"/>				£

(d) I was discriminated on the grounds of:

Age	<input type="checkbox"/>	Disability	<input type="checkbox"/>	Equal pay	<input type="checkbox"/>
Part time Working	<input type="checkbox"/>	Race	<input type="checkbox"/>	Religious belief/ political opinion	<input type="checkbox"/>
Sex	<input type="checkbox"/>	Sexual Orientation	<input type="checkbox"/>		

If you select the religious belief/political opinion box, we will regard your complaint as a matter for The Fair Employment Tribunal, which deals with unlawful discrimination on these grounds

(e) Other complaints: (please specify):

7.2● If you complaining about discrimination

Please give the date(s) on which the matter about which you are complaining happened? Where discrimination occurred on a number of occasions give the most recent date when it happened. If you wish to give additional dates you can do this at 7.4 below.

Please also indicate if the discrimination is ongoing

Day Month Year - - ongoing

7.3● You only need to answer this question if you are complaining about discrimination on the grounds of ‘Religious Belief/Political Opinion’

When did you first know of the matter about which you are complaining

Day Month Year - -

7.4★ Details of your claim

Please tell us in this section about your claim. It is important that you give us details to support the complaint(s) that you have selected at 7.1.

Details include:

- A description of the act or acts complained of
- When the act or acts took place
- The names of the people involved
- Why you believe the action was unlawful
- Why you believe you are entitled to claim for payment that you say is owed
- The amount of any payment you believe is owed
- If you are complaining about discrimination in recruitment – what job you applied for
- If you are complaining about discrimination by way of victimisation, the type of discrimination that you are relying on e.g. sex, race, disability etc .

7.4★ Details of your claim (continued)

8 Other information

- 8.1 You should add any extra relevant information you want us to know here, giving the question number to which the information relates. **You should not send us documents or evidence relating to your case at this stage.**

9 Special arrangements

- 9.1 Please tell us what, if any, special arrangements you think we need to make in dealing with your case. For example, you should let us know if you require us to make any reasonable adjustment (due to disability) or if we need to arrange for an interpreter to translate for you at your tribunal hearing.

You (or your representative, if you have one) should sign and date the form.

Signature: Date: - -

Data Protection Act 1998. We will send a copy of this form to the respondent(s), the Labour Relations Agency and the Equality Commission for Northern Ireland, where appropriate. We will put some of the information you give us on this form onto a computer. This helps us to monitor progress, produce statistics and carry out research. We are required by law, except in certain circumstances, to publish information on tribunal claims in the Register of Claims and in due course in the Register of Decisions. We are required to make the Registers available to the public.

Please ensure that you pay the correct postage when sending us your completed form, as failure to do so may lead to your mail not being received.

Please return your completed claim form to:

**The Secretary
Office of the Industrial Tribunals &
The Fair Employment Tribunal
Killymeal House
2 Cromac Quay
Ormeau Road
Belfast BT7 2JD**

For Office Use

Received at:

Initials: _____

Date: _____