

Response to an Industrial Tribunal and/or Fair Employment Tribunal claim – ET3(NI)

You can make your response on-line, visit our website www.employmenttribunalsni.co.uk.

When you make your response on-line, receipt will be acknowledged electronically, there is no need to send a hard copy by fax or post.

Filling in the form

We have designed these guidance notes to be as helpful as possible. However, **they do not give a full statement of the law**. When responding please state the case reference number that we allocated to the claim that we sent to you and in any subsequent contact that you have with the Office of the Tribunals.

1 Respondent details

- 1.1 ★ Please give the full name of your organisation (and say whether it is a plc, limited company (Ltd), a partnership or a sole trader) and the name of the person in your organisation that we should use as a contact point if you have not appointed a representative.
- 1.2 ● If the respondent's name is different from that shown on the claim form that we sent to you, please explain here.
- 1.3 ★ Give your organisation's full address including the post code.
- 1.4 You should give us the phone number (landline and/or mobile), including the full dialling code, for the contact person named at **1.1**. If there is a phone number we can use for contact outside working hours if necessary, please give us details here. Please also give us your fax number and/or e-mail address if relevant. Please do not provide an e-mail address **unless** you check your e-mails every day. *Note that we will only use e-mail or fax to communicate with you if we think it is appropriate to do so.*

2. Your representative

A person you ask to present your case to a tribunal and act for you throughout the course of your tribunal proceedings is known as your representative. **Please fill in this section only if an individual or organisation has agreed to represent you.** Do not give the name of a person or an organisation who only gives you advice on filling in this form.

If you have appointed a representative, we will in future only send correspondence to your representative and not to you.

- 2.1 If you know the name of the person representing you, give their name here.
- 2.2 If applicable, give the name of your representative's organisation (for example, the firm of solicitors or employers' association for which the representative works).

- 2.3 Give the full address and post code of the representative's organisation.
- 2.4 Give the representative's phone number including the full dialling code. Also give the fax number and/or e-mail address for your representative, if available.

3. Claim details (important statutory procedures)

- 3.1 Please tick the appropriate box to tell us what your relationship is or was to the claimant. In most cases, this should be a straightforward question to answer. However, in some cases, particularly where a 'non-traditional' working arrangement is involved, it may raise legal issues. An 'employee', for these purposes, is someone who works under a 'contract of employment' – but bear in mind that a contract need not be in writing: it can be written, oral, implied by the parties' behaviour, or a combination of all three. If you are in any doubt about whether or not the claimant is or was an employee, you might want to get advice. A worker, for these purposes, is someone who is not working under a contract of employment but who has a contract under which the worker agrees personally to perform work for, or provide service to you. Please tick the appropriate box to say whether the claimant is, or was, an employee.
- 3.2 If the claim, or part of it, is about a dismissal, please tick the appropriate box to say whether or not you agree that the claimant was dismissed.
- 3.3 If the claim includes a complaint about something other than a dismissal, please tick the appropriate box to say whether or not it relates to something that you did on the grounds of the claimant's conduct or capability.
- 3.4 If you answered 'Yes' to 3.2 or 3.3, please explain what stage you have reached in the dismissal and disciplinary procedure giving dates and details of meetings held where relevant.

4. Employment details

This section is relevant if the claimant is or was an employee or a worker providing services to the respondent.

- 4.1 Please tick the appropriate box to say whether or not you agree with the dates of employment given by the claimant in 5.2 on their claim form. If you tick 'Yes', please now go straight to 4.3.
- 4.2 If you disagree, please give the details you believe to be correct here and say why you disagree with the dates given by the claimant.
- 4.3 Please tick the appropriate box to say whether or not you agree with the claimant's answer about the description of their job or their job title. If you disagree with the claimant's job description or job title, please give the details you believe to be correct here.

5. Earnings and benefits

- 5.1 Please tick the appropriate box to say whether or not you agree with the hours of work the claimant given in **6.1** on their claim form. If you tick 'Yes', please now go straight to **5.3**.
- 5.2 If you disagree, please give the number of hours you believe to be correct here.
- 5.3 Please tick the appropriate box to say whether you agree with the earnings details the claimant has given in **6.2** on the claim form. If you tick 'Yes', please now go straight to section **5.5**.
- 5.4 If you disagree, please give the earnings details you believe to be correct here.
- 5.5 Please tick the appropriate box to say whether or not you agree with the claimant's answer about working or being paid for a period of notice in **6.3** on their claim form. If you tick 'Yes', please now go straight to **5.7**.
- 5.6 If you disagree with the claimant's answer, please give the details you believe to be correct. If relevant, please give a full explanation of the reasons why the claimant did not work, or did not receive payment for, a period of notice.
- 5.7 Please tick the appropriate box to say whether or not you agree with the details given by the claimant about pension and other benefits in **6.4** and **6.5** on their claim form. If you tick 'Yes', please now go straight to **section 6**.
- 5.8 If you disagree, please give the details you believe to be correct here.

6. ★ Response

- 6.1 ★ Tell us whether or not you intend to resist the claim made by the claimant. If you only plan to resist a part of the claim, please tick 'Yes' and tell us which part of the claim you are resisting in 6.2 below.
- 6.2 ★ If you have ticked 'Yes' at 6.1 please explain the grounds on which you are resisting the claim. If the claim is about more than one issue, you will need to respond to each issue. Please explain what points you disagree with and give information to support your argument. If your organisation dismissed the claimant, explain the procedure you followed before the actual dismissal and give full reasons why you dismissed the claimant. If the claim is about discrimination, please provide a response to each of the statements made by the claimant and describe the action you took when the claimant raised the matter with you. Give full reasons if you disagree that your organisation owes the claimant money or if you disagree with the amount the claimant expects. **At this stage you should not send any documents to support your response.** However, you may have to produce them if the claim goes to a hearing.

If there is not enough space for your answer, please continue in section 7, making it clear to which question you are responding.

7. Other information

7.1 You can also use this space to complete your answers to any of the other questions on this form. If you do this, please tell us which question you are answering.

You may wish to give us other relevant information in response to the claim that has been made or to let us know that internal disciplinary procedures have not yet been completed.

8. Special arrangements

Please tell us of any special arrangements you think we need to make in dealing with your case. For example, let us know if we need to make any reasonable adjustments due to disability.

Now please sign your name and date the form. Appointed representatives can sign their name. Make sure you keep a copy of the form that you are sending to us.