

LRA Form 7.11
Labour Relations Act 1995
Sections 133, 135, 191(1) and
191(5A)

PART A
REFERRING A DISPUTE TO
THE FBCWC FOR CONCILIATION
(INCLUDING CON-ARB)

READ THIS FIRST



WHAT IS THE PURPOSE OF THIS FORM?

This form enables a person or organisation to refer a dispute to the FBCWC for conciliation and con-arb.

WHO FILLS IN THIS FORM?

Employer, employee, union or employers' organisation.

WHERE DOES THIS FORM GO?

The Secretary of the FBCWC. See details on this page

WHAT WILL HAPPEN WHEN THIS FORM IS SUBMITTED?

When you refer the dispute to the FBCWC, it will appoint a commissioner who must attempt to resolve the dispute within 30 days.

OTHER INSTITUTIONS

Please note that if you are covered by the CCMA, another bargaining council, a statutory council or an accredited agency you may have to take the dispute to that council or agency.

You may also need to deal with the dispute in terms of a private procedure if one applies.

If in doubt contact the FBCWC for assistance.

FURTHER INSTRUCTIONS

A copy of this form must be served on the other party.

Proof that a copy of this form has been served on the other party must be supplied by attaching:

- A copy of a registered slip from the Post Office;
- A copy of a signed receipt if hand delivered;
- A signed statement confirming service by the person delivering the form;
- A copy of a fax confirmation slip; or
- Any other satisfactory proof of service.

FBCWC
19 Kent Street
SALT RIVER
7925
P O Box 1123
WOODSTOCK
7915
Tel: (021) 448-4436
Fax: (021) 447-0376
Email: fbwc@netactive.co.za

READ THIS FIRST



Tick the correct box

The name of the employee or an employer that is referring the dispute must be filled in (a).
If there is more than one employee to the dispute and the referring party is not a trade union, then each employee must supply their personal details and signature on a separate page, which must be attached to this form.

These alternate contact details should be of a union official or representative, a relative or a friend.

The name of the trade union or employers' organisation that is referring the dispute or assisting a member to refer a dispute must be filled in (b).

OTHER PARTIES

If more than one party is referring the dispute or if the dispute is referred against more than one party, write down the additional names and particulars on a separate page and attach to this form.

Tick the correct box

1. DETAILS OF PARTY REFERRING THE DISPUTE

As the referring party, are you:

- An employee A trade union
- An employer An employers' organisation

(a) Name of the party if the referring party is an employee or employer

Name:

ID Number:

Postal Address:

..... Postal Code:

Tel: Cell:

Fax: Email:

Alternate contact details of employee:

Name:

Postal Address:

..... Postal Code:

Tel: Cell:

Fax: Email:

(b) Name of the referring party if the referring party is an employers' organisation or trade union, or if the employers' organisation is assisting a member to the dispute

Name:

Postal Address:

..... Postal Code:

Tel: Cell:

Fax: Email:

2. DETAILS OF THE OTHER PARTY (PARTY WITH WHOM YOU ARE IN DISPUTE)

The other party is:

- An employee A trade union
- An employer An employers' organisation

Name:

Postal Address:

..... Postal Code:

Tel: Cell:

Fax: Email:

Please turn over →

Tick the correct box

If the dispute concerns dismissals, also complete Part B (See Page 5)



This section must be completed!

If necessary write the details on a separate page and attach to this form

UNFAIR LABOUR PRACTICE

If the dispute(s) concerns an unfair labour practice the dispute must be referred (ie. Received by the FBCWC) within 90 days of the act or omission which gave rise to the unfair labour practice. If more than 90 days has elapsed you are required to apply for condonation.

3. NATURE OF THE DISPUTE

What is the dispute about (tick only one box)?

- | | |
|--|--|
| <input type="checkbox"/> Freedom of association and general protections Section 9(1) | <input type="checkbox"/> Unilateral change to terms and conditions of employment Sec 64(4) |
| <input type="checkbox"/> Interpretation or application of collective agreement Section 24(2) | <input type="checkbox"/> Disputes in essential services Section 74(1) |
| <input type="checkbox"/> Interpretation or application of collective bargaining provisions Section 63(1) | <input type="checkbox"/> Unfair dismissals Section 191(1) |
| <input type="checkbox"/> Any matter of mutual interest Sections 64(1) & 134 | <input type="checkbox"/> Severance pay |
| <input type="checkbox"/> Refusal to bargain Section 64(2) & 134 | <input type="checkbox"/> Unfair labour practices Section 191(5A) |
| <input type="checkbox"/> Other (please describe) | |

Summarise the facts of the dispute you are referring:

.....

.....

.....

4. DATE DISPUTE AROSE/DATE OF DISMISSAL

The dispute arose on:
(give the date, day, month and year)

The dispute arose where:
(give the city/town in which the dispute)

If the dispute concerns a dismissal the date inserted here must be the same as that set out in item 2 of Part B.

5. DETAILS OF DISPUTE PROCEDURES FOLLOWED

Have you followed all internal grievance / disciplinary procedures YES NO before coming to the FBCWC?

Describe the procedures followed:

.....

.....

.....

6. RESULT OF CONCILIATION

What outcome do you require?

.....

.....

Please turn over →

<p>Tick the correct box <input checked="" type="checkbox"/></p> <p>Parties may, at their own cost, bring interpreters for languages other than the official South African languages. Please indicate this under 'other'.</p> <p>Special features might be the urgency of the matter, the large number of people involved, important legal or labour issues etc.</p> <p>Only fill this in if this is a dispute about unilateral change to terms and conditions of employment.</p> <p>The con-arb process involves arbitration being held immediately after the conciliation if the dispute remains unresolved.</p> <p>Only fill this in if you object to the arbitration commencing immediately after conciliation. An object cannot be made in disputes relating to probation.</p>	<p>7. INTERPRETATION SERVICES</p> <p>Do you require an interpreter at the conciliation / con-arb? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If yes, please indicate for what language:</p> <table border="0"><tr><td><input type="checkbox"/> Afrikaans</td><td><input type="checkbox"/> isiNdebele</td><td><input type="checkbox"/> isiZulu</td><td><input type="checkbox"/> isiXhosa</td></tr><tr><td><input type="checkbox"/> Sepedi</td><td><input type="checkbox"/> Sesotho</td><td><input type="checkbox"/> Setswana</td><td><input type="checkbox"/> siSwati</td></tr><tr><td><input type="checkbox"/> Tshivenda</td><td><input type="checkbox"/> Xitsonga</td><td colspan="2"><input type="checkbox"/> Other <i>(please indicate)</i></td></tr></table> <p>8. SPECIAL FEATURES / ADDITIONAL INFORMATION</p> <p>Briefly outline any special features / additional information the FBCWC needs to note:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>9. Dispute about unilateral change to terms and conditions of employment (s64(4))</p> <p>I/we require that the employer party not implement unilaterally the proposed changes that led to this dispute for 30 days, or that it restore the terms and conditions of employment that applied before the change.</p> <p>Signed: <i>(Employee party referring the dispute)</i></p> <p>10. OBJECTION TO CON-ARB PROCESS</p> <p>I/we object to the arbitration commencing immediately after the conciliation in terms of Section 191(5A)®.</p> <p>Signed:</p> <p>If the employer objects to the arbitration commencing immediately after the conciliation the employer must submit a written notice in terms of CCMA Rule 17(2) at least 7 days prior to the scheduled date of the conciliation. The employer must attend the conciliation regardless of whether it makes this objection.</p> <p>11. CONFIRMATION OF ABOVE DETAILS</p> <p>Signature of party referring the dispute:</p> <p>Signed at on this (place) (date)</p>	<input type="checkbox"/> Afrikaans	<input type="checkbox"/> isiNdebele	<input type="checkbox"/> isiZulu	<input type="checkbox"/> isiXhosa	<input type="checkbox"/> Sepedi	<input type="checkbox"/> Sesotho	<input type="checkbox"/> Setswana	<input type="checkbox"/> siSwati	<input type="checkbox"/> Tshivenda	<input type="checkbox"/> Xitsonga	<input type="checkbox"/> Other <i>(please indicate)</i>	
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<input type="checkbox"/> Tshivenda	<input type="checkbox"/> Xitsonga	<input type="checkbox"/> Other <i>(please indicate)</i>											

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Section 135
Labour Relations Act 1995
191(5A)

PART B ADDITIONAL FORM FOR DISMISSAL DISPUTES ONLY

DATE OF REFERRAL

Dismissal disputes must be referred (i.e. received by the FBCWC) within 30 days of dismissal or, if it is a later date, within 30 days of the employer making a final decision to dismiss or to uphold the dismissal. If more than 30 days has elapsed since the date of your dismissal, you are required to apply for condonation.

Tick the correct box

Tick the correct box

If necessary write the details on a separate page and attach to this form.

1. COMMENCEMENT OF EMPLOYMENT

When did you start working at the company?

2. NOTICE OF DISMISSAL

When were you dismissed (date)?

How were you informed of your dismissal?

In writing Orally

Other (please describe)

3. REASON FOR DISMISSAL

Why were you dismissed?

Misconduct Incapacity

Operational Requirements Unknown

Other (please describe)

4. WAS THE DISMISSAL RELATED TO PROBATION YES NO

5. FAIRNESS/UNFAIRNESS OF DISMISSAL

a. Procedural Issues

Was the dismissal procedurally unfair? YES NO

If yes, why?

.....
.....
.....

b. Substantive Issues

Was the reason for the dismissal unfair? YES NO

If yes, why?

.....
.....
.....

CERTIFICATE OF OUTCOME OF

~~DISPUTE REFERRED TO CONCILIATION~~

CASE NUMBER:

I certify that the dispute between:

..... and

..... (referring party) (other party/parties)

Referred to conciliation on:

..... (give date)

Concerning

.....
.....
.....

Was resolved on the or Remains unresolved as at
(give date) (give date)

Granted	Not applicable
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Condonation:

Arbitration	Labour Court	Strike/ Lockout	None
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If this dispute remains unresolved, it can be referred to:

.....
Name of Commissioner

.....
Signature of Commissioner

.....
Place