

Federal Public Sector Labour Relations and Employment Board Commission des relations de travail et de l'emploi dans le secteur public fédéral

F.P.S.L.R.E.B. File Number (FOR OFFICE USE ONLY)

## Form 22

Paragraph 89(1)(b) of the Federal Public Sector Labour Relations Regulations **NOTICE OF REFERENCE TO ADJUDICATION OF A GROUP GRIEVANCE** Federal Public Sector Labour Relations Act

NOTICE: (1) A copy of the original group grievance and of the *Consent of Aggrieved Employees to a Group Grievance* (Form 19) must be attached.

(2) It is your responsibility to inform the Board of any changes to your mailing and electronic addresses or telephone numbers.

(3) Information relating to the proceedings is subject to the *Board's Policy on Openness and Privacy*. In accordance with that policy, the Board conducts its hearings in public, except in exceptional circumstances. It also provides public access to case files and posts its decisions electronically on its website. The Board's *Policy on Openness and Privacy* is posted on the Board's website.

## 1. Bargaining agent information:

Name:				
Mailing address: Apartment <i>(if applicable)</i> :	Number and street:			
City:	Province or Territory:	Postal code:		
Name of authorized representative:				
Mailing address (if different from above):				
Apartment ( <i>if applicable</i> ):	Number and street:			
City:	Province or Territory:	Postal code:		

Telephone number:

Fax number:

Email address:

- 2. Name of the aggrieved employees' employer:
- 3. Description of the bargaining unit to which the aggrieved employees belong:

4. Portion of the federal public administration in which the aggrieved employees work:

5. Hearing location requested:

6. Date on which the group grievance was presented at the first level of the group grievance process (dd/mm/yyyy):

**7.** Date on which the group grievance was presented at the final level of the group grievance process (dd/mm/yyyy):

8. Date on which the employer provided its decision at the final level of the group grievance process (*if applicable*) (dd/mm/yyyy):

9. Term of the collective agreement or arbitral award that is the subject of the group grievance, or both, as the case may be:

collective agreement:

from (dd/mm/yyyy):

to (dd/mm/yyyy):

10. Provision of the col	lective agreement or arbit	ral award that is the subject
of the group grievance		
Complete section 11 only if an a	adjudicator is named in the collective (	agreement.
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11. Adjudicator inform	ation:	
Name:		
Mailing address: Apartment <i>(if applicable</i> ):	Number and street:	
	Number a	
City:	Province or Territory:	Postal code:
Telephone number:		
Fax number:		
Email address:		
Complete section 12 only if the	parties have selected an adjudicator.	
,,,,,,,,,,,,,,,,,,,,,,,		
	ation:	
	ation:	

Mailing address:					
Apartment (if applicable):	Number a	Number and street:			
City:	Province or Territory:	Postal code:			
Telephone number:					
Fax number:					
Email address:					
Complete section 13 only if you re	Complete section 13 only if you request that a board of adjudication be established.				
13. Information of the p adjudication:	erson nominated as a me	mber of the board of			
Name:					
Mailing address:					
Apartment ( <i>if applicable</i> ):	Number and street:				
City:	Province or Territory:	Postal code:			
Telephone number:					
Fax number:					
Email address:					
14. Do you agree to part	icipate in mediation?				
Mediation is a voluntary, confidential process in which an impartial third party, the mediator, facilitates communication between the parties with a					
view to assisting them to reach a mutually acceptable outcome to the					
dispute.					
yes					
no					

I, the undersigned, duly authorized representative of the bargaining agent, file this Notice of *Reference to Adjudication of a Group Grievance*.

Date (dd/mm/yyyy):

(Signature of authorized representative of bargaining agent):

(Office held with the bargaining agent):