

NOTICE OF COMPLAINT TO A RIGHTS COMMISSIONER

ADOPTIVE LEAVE ACT, 1995

(PLEASE USE BLOCK CAPITALS)

EMPLOYEE'S DETAILS

COMPANY/EMPLOYER'S DETAILS

(Full legal name: if in doubt consult your P45/P60)

Name: _____

Name: _____

Address: _____

Address: _____

Tel: _____

Tel: _____

E-Mail: _____

E-Mail: _____

Job Title: _____

N.B.: IS YOUR EMPLOYER AWARE THAT YOU ARE BRINGING THIS DISPUTE TO A RIGHTS COMMISSIONER? YES__ NO__

NAME AND ADDRESS OF YOUR REPRESENTATIVE (IF ANY):

DATE ON WHICH EMPLOYMENT BEGAN: ____/____/____

(A) MY DISPUTE RELATES TO ADOPTIVE LEAVE (PART II OF THE ACT) AND IS AS FOLLOWS:

(B) MY DISPUTE RELATES TO THE PROVISIONS OF MY EMPLOYMENT CONTRACT (PART III OF THE ACT) AND IS AS FOLLOWS:

SIGNATURE: _____

DATE: ____/____/____

PLEASE NOTE THAT A COPY OF THIS FORM WILL BE FORWARDED TO YOUR EMPLOYER.