

**NOTICE OF COMPLAINT TO A RIGHTS COMMISSIONER**  
**EUROPEAN COMMUNITIES (PROTECTION OF EMPLOYMENT)**  
**REGULATIONS, 2000**

**PLEASE USE BLOCK CAPITALS**

Please refer to "Notes for Completion of Forms" before filling out this form

**EMPLOYEE'S DETAILS**

**Name:** \_\_\_\_\_

**Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Tel:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Job Title:**

\_\_\_\_\_

**PPS No:**

**COMPANY/EMPLOYER'S DETAILS**  
**(Please refer to Notes for Completion of Forms)**

**Name:** \_\_\_\_\_

**Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Tel:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Nearest Town to Place of Employment:**

\_\_\_\_\_

**Employer's Registered (PAYE) No:**

**N.B.: IS YOUR EMPLOYER AWARE THAT YOU ARE BRINGING THIS COMPLAINT TO A RIGHTS COMMISSIONER?**

YES  NO

**Name and Address of your representative (if any):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

