

For official use Case number.....

Date Received.....

Application to the Employment Tribunal

When completed return to:- Clerk to the Employment Tribunal
5th Floor Victory House, Prospect Hill, Douglas, IM1 1EQ

Please complete using **BLACK** ink as the form has to be copied

1. Please state the complaint/s that you wish the tribunal to consider:- (eg. Unfair Dismissal)

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.....

2. Please give your details in BLOCK CAPITALS

SurnameOther Names.....Mr/Mrs/Miss/Ms

Address

.....

Telephone numberDate of Birth.....

If you are to be represented by someone else please give their name and address here.

Please note that all further correspondence will be sent to this person

3. Please give details of the Respondent - the employer, person or body that you are complaining about

Name of Respondent

Address

.....

Telephone Number

4. Your Job Title

Date Employment commenced.....

Last Day Employed (if appropriate)

Normal Rate of Pay £..... per (week/month/other)

Details of any additional earnings with this employer

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Name of applicant.....

Name of respondent.....

5. Please give details of your complaint

Please list any enclosed supporting evidence or documents

1

2.....

3.....

Signature.....

Date.....

Applicants should note that there are strict time limits within which applications to the tribunal must be made and your application must be received by the tribunal office before the expiry of the time limit.