

4. If you have chosen to be represented by someone else, please give their details:

If you fill this section in we will only send correspondence to your representative in future, **not to you**

4.1 Representative's details:

Title: Mr Mrs Miss Ms Other (please specify)

Forename(s):

Surname:

4.2 Address (inc. postcode):

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode: <input type="text"/>

4.3 Contact telephone numbers:

Mobile: <input type="text"/>	Home: <input type="text"/>
Work: <input type="text"/>	

4.4 Email address:

<input type="text"/>

5. RESPONDENT'S DETAILS

5.1 Give the correct name of your employer, the organisation or the individual(s) you are claiming against (this question must be completed)

If your complaint is against more than one respondent please give the names, addresses and postcodes of additional respondents on a separate sheet of paper

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

5.2 Address (inc. postcode):

(this question must be completed)

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode: <input type="text"/>

5.3 Contact telephone numbers:

Mobile: <input type="text"/>	Home: <input type="text"/>
Work: <input type="text"/>	

6. EMPLOYMENT DETAILS

6.1 When did your employment start?

If your employment has ceased or is due to cease please give the date.

6.2 Are you, or were you, an employee of the respondent?

(this question must be completed)

Yes

No

6.3 Job Title:

6.4 How much are, or were, you paid?

Pay before deductions:

£ : p

Normal take-home pay (including overtime, commission, bonuses and so on):

£ : p

(please indicate whether pay is HOURLY/WEEKLY/MONTHLY or YEARLY)

Additional earnings or benefits:

If necessary please continue on a separate sheet of paper

7. SUPPORTING DOCUMENTATION

Please list below details of any supporting documents or evidence you are submitting with this claim:

(For example: 1. Letter of dismissal 2. Statement of Main Terms and Conditions of Employment)

8. DISABILITY/OTHER NEEDS

If you have a disability, or indeed any other needs, please let us know if we need to make any special arrangements for you when dealing with your case (for example, if we need to arrange for a hearing loop, interpreter etc.)

PLEASE SIGN, DATE AND PRINT YOUR FULL NAME

Signature:

Date:

Please print name:

Data Protection Act 2002

As a statutory requirement some of the information you give us on this form will be entered onto a computer and onto a Public Register. We will also send a copy of this form to the respondent(s) and the Manx Industrial Relations Service.

Guidance Notes for the Completion of a Claim to the Employment Tribunal

These guidance notes have been prepared to assist with the completion of a claim to the Employment Tribunal. They do not purport to be a complete or definitive statement of the law.

General

- (i) Please read these notes carefully before completing your claim to the Employment Tribunal.

A claim may be presented either by completing the claim form, prescribed by the Department of Trade & Industry under the provisions of Rule 37 of the Employment Tribunal Rules 2008 ("the Rules"), or by submitting a claim in writing, provided that in either case the claim must include certain information as required under the provisions of the Rules. The claim form indicates which questions are mandatory for you to answer.

- (ii) Sometimes an individual may wish to discuss the matter before making a claim. In such circumstances they should contact the **Manx Industrial Relations Service**, who provide a free and impartial service, and are available to talk to individuals and employers with regard to matters such as employment rights, employment disputes and potential claims to the Employment Tribunal. If appropriate, they can also conciliate even if no claim has been made to the Employment Tribunal.

The Manx Industrial Relations Service can be contacted as follows:

Tel: (01624) 672942

Fax: (01624) 687050

Email: iro@gov.im.

Website: www.mirs.org.im

Help may also be available from other sources such as Trade Unions or you may wish to seek legal advice.

- (iii) It should be borne in mind that **strict time limits** apply with regard to bringing a claim to the Employment Tribunal. Details of the specific time limit applicable in respect of any particular claim can be obtained by contacting the Manx Industrial Relations Service. **Please note that discussions with the Manx Industrial Relations Service, or other sources, will not alter or extend the time limits.**

Making a Claim Outside a Relevant Time Limit

If you are making a claim outside a relevant time limit imposed by law, a written application to the Tribunal to extend the time for bringing the claim must be submitted with your claim, **including** an explanation as to why you could not comply with the time limit. If no such application is made, the claim will be returned and treated as if it had not been presented.

Filling in the Claim Form

Please complete the form **clearly and in black ink** (as the form will need to be photocopied). In the event that there is insufficient space, please continue on a separate sheet(s) of A4 paper as necessary, marking each additional sheet at the top with the name of the Claimant and the name of the Respondent.

As indicated below by questions marked with an asterisk (*), certain **information must be provided in the claim** otherwise the claim will be returned and treated as if it had not been presented.

Please note that a **claim form may only be used by one claimant** to present their claim.

Question 1 – Claimant’s Details

- 1.1 Tick the relevant box to show your title.
- 1.2* Give your forename(s) in full.
- 1.3* Give your surname.
- 1.4 Give your date of birth in day/month/year format (for example 25/06/1970).
- 1.5* Give your full postal address including the postcode.

This will be the address to which correspondence will be sent unless you have chosen to be represented by someone else and have provided their details (see question 4.). If you have chosen to be represented by someone else, correspondence will only be sent to that person.

If you or your representative change address, or if you choose to be represented by someone else at a later date, you should immediately provide notice of such change to the Clerk and to the other party or parties and to the Manx Industrial Relations Service.

- 1.6 If you are happy to be contacted by telephone during normal working hours, please provide mobile, home and/or work telephone numbers as appropriate (including the full dialling code).
- 1.7 If you are happy to be contacted by email please provide your email address. If you provide an email address you should ensure that you check your emails every day.

Question 2* – Claim(s) that you wish the Tribunal to Consider

Please detail the nature of the claim or claims that you are asking the Tribunal to consider, for example Unfair Dismissal, Unlawful Deduction from Pay, Sex Discrimination etc. Remember that a claim for Unlawful Deduction from Pay includes a claim for non payment of monies you believe you are owed.

Question 3* – Brief Summary of Facts Giving Rise to Your Claim

Please use the space provided (and continue on a separate A4 sheet(s) as necessary) to explain briefly the facts giving rise to each of the claims that you wish the Tribunal to consider as identified at question 2.

If you are claiming an Unlawful Deduction from Pay, please explain why you believe you are entitled to this payment, how much you are claiming and how you have worked this out. If you are claiming more than one type of payment please give the amounts claimed and how you worked out each amount.

Question 4 - Details of Your Representative

You only need to fill in this section if you have chosen to be represented by another person. Once the details of a representative have been provided all future correspondence will only be sent to that person, **not** to you.

You can choose to be represented by someone at any time and, if you choose to be represented at a later date you should immediately give notice of your representative to the Clerk and to the other party or parties and, where appropriate, to the Manx Industrial Relations Service.

- 4.1 Specify the title, forename(s) and surname of the person who is to represent you.
- 4.2 Give the full postal address, including the postcode, of your representative. This will be the address to which all correspondence will be sent in future.
- 4.3 If your representative is happy to be contacted by telephone during normal working hours, please provide mobile, home and/or work telephone numbers as appropriate (including the full dialling code).
- 4.4 If your representative is happy to be contacted by email, give their email address. If an email address has been provided, your representative should ensure that they check their emails every day.

Question 5 – Details of Respondent(s)

The Respondent is the employer, organisation or individual(s) against whom your claim is made. In some cases there may be more than one Respondent to a claim, in which case the details for any additional Respondent(s) should be provided on a separate sheet of paper.

- 5.1* Before completing this section it is important that you should carefully consider who it is that you are claiming against, and ensure, as far as you are able to that you accurately identify the details of the Respondent.

For example, even if a Claimant works in a business generally known as "Joe Soaps" the Respondent's correct details may in fact be "Joe Soap Limited" or "Joe Soap & Fred Bloggs trading as Joe Soaps". Your Job Offer, Terms & Conditions of Employment or Pay Statement may help in identifying the correct details of the Respondent.

- 5.2* Give the full postal address, and the postcode, for the Respondent. It is important that you accurately identify, as far as you are able, the address details of the Respondent.
- 5.3 Give telephone number(s) (including the full dialling code) where the Respondent can be contacted during normal working hours.

Question 6 – Employment Details

If you are not, or were not, an employee, but are, or were, a worker providing services to the Respondent (examples of which might include an agency worker, a casual worker or a freelance worker), please answer this question as if "employment" referred to your working relationship with the Respondent. (Note if you are not, or were not, an employee your employment rights may be more limited than if you are, or were, an employee).

6.1 If your complaint is against your employer or ex-employer, please give the date when your employment started in day/month/year format (for example 25/10/1990) and, if applicable, the date when it ended or is due to end.

6.2* Please indicate if you are, or were, an employee of the Respondent by ticking the appropriate box.

6.3 Indicate your job title.

6.4 Please provide details of how much you are or were paid by the Respondent, firstly in terms of your pay (gross) before deductions for Income Tax and National Insurance Contributions, and then your normal take-home (nett) pay (in other words including overtime, commissions and bonuses but after deductions for Income Tax and National Insurance Contributions).

Please also provide details of any additional earnings or benefits, not already included in your gross or nett pay figures (continuing on a separate sheet of paper as necessary).

Please indicate whether your pay is for an hour, a week, a month or a year.

Question 7 – Supporting Documentation

Please list details of any supporting documents or evidence that you are submitting with your claim. Examples of such documents might include a letter of dismissal, terms and conditions of employment or relevant pay slips.

Question 8 – Disability/Other Needs

Please advise us of any arrangements we may need to make for you when dealing with your case. An example of this may be if you are hard of hearing and require a hearing loop when you attend a hearing or if you will require an interpreter to be present. If you are unsure, please feel free to contact the Clerk and discuss the matter as appropriate.

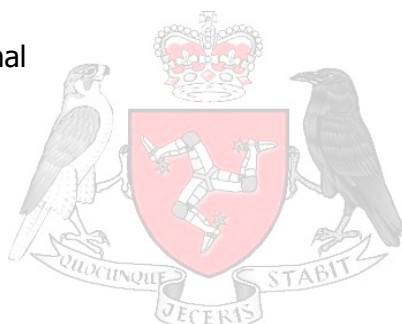
Sign, Date and Print Your Full Name

This part should be completed by you, or your representative, if you wish.

What Next

Please check that you have answered all of the questions to the best of your ability, paying particular attention to the questions that are marked with an asterisk to indicate that it is mandatory for you to provide the information, and then forward your claim, together with any supporting documentation which should be listed under Question 7. of the claim form to:

Clerk to the Employment Tribunal
Tribunals Office
Isle of Man Courts of Justice
Deemsters Walk, Bucks Road
Douglas, Isle of Man
IM1 3AR



Contact details:

Tel: 685941

Fax: 685976

Email: tribunals@gov.im