## Schedule 1 — Forms

## Form 1

			[r. /]
Employment Dispute Resolution			Application to conduct dispute
Act 2008 s. 27			resolution process or model
Western Australian	n Industrial Relat	tions	dispute resolution process
Commission			
Application No	of 20		
Applicant	Name		
	Contact		
	person		
	Mailing		
	address		
	Telephone		
	Fax		
	Email		
	address		
Application			esolution process conducted by the aployment Dispute Resolution Act 2008
Matter in dispute <sup>1</sup>			
Is the matter	Yes		
urgent?	$\prod_{N_0}$		
[Tick one box]			
Parties to the matter in dispute <sup>2</sup>			
Party 1	Full name		
	Contact		
	person		
	Mailing		
	address		
	Telephone		
	Fax		
	Email		
	address		

Party 2	Full name				
	Contact				
	person				
	Mailing				
	address				
	Telephone				
	Fax				
	Email				
	address				
Party 3	Full name				
	Contact				
	person				
	Mailing				
	address				
	Telephone				
	Fax				
	Email				
	address				
Name of			Number		
relevant			applicab	ole)	
Commonwealth					
workplace					
agreement					
Type of					
assistance					
sought from IR					
Commission					
Signature of			Date		
applicant					

Notes to Form 1 —

- 1. Provide a brief description. Attach schedule if necessary.
- 2. If more than 3 parties are involved attach a sheet identifying relevant details of each additional party.

Chief Commissioner	
Dated	20