



**NUMBER:**

**Form 14 - Application for proportionate payment of long service leave**

Industrial Relations Act 2016, section 95(3)

Industrial Relations (Tribunals) Rules 2011, rule 150

*Version 3*

Applicant: **(NAME OF APPLICANT IN MATTER)**

AND

Respondent: **(NAME OF RESPONDENT IN MATTER)**

This is an Application to the Queensland Industrial Relations Commission, pursuant to section 95 of the *Industrial Relations Act 2016* for an order for payment of long service leave the applicant was entitled to on termination of employment.

**1. The Applicant:**

<b>Title</b>			
<b>Name</b>			
<b>Postal address</b>			
<b>Suburb/Town</b>		<b>Postcode</b>	
<b>Phone number</b>		<b>Fax number</b>	
<b>Mobile number</b>			
<b>Email address</b>			

**(a) Does the Applicant have a representative?**

A representative might be a lawyer, a union, an agent or a family member or friend who will speak on behalf of the Applicant. There is no requirement to have a representative.

- Yes - Provide representative's details below and file a Form 33 or 34  
 No

**b) The Applicant's representative**

<b>Organisation/Firm</b>			
<b>Name of contact person</b>			
<b>Postal address</b>			
<b>Suburb/Town</b>		<b>Postcode</b>	
<b>Phone number</b>		<b>Fax number</b>	
<b>Mobile number</b>			
<b>Email address</b>			

**2. The Respondent**

The Applicant must serve a copy of this Application on the Respondent

<b>Name of Respondent</b>			
<b>Name of contact person</b>			
<b>Postal address</b>			
<b>Suburb/Town</b>		<b>Postcode</b>	
<b>Phone number</b>		<b>Fax number</b>	
<b>Mobile number</b>			
<b>Email address</b>			

**3. DETAILS OF DECISION SOUGHT:**

--

#### 4. DECLARATION

**Further, I declare that:**

*(Select and complete all that apply)*

<input type="checkbox"/>	[I / The employee] [am / is / was] a trainee or apprentice.
<input type="checkbox"/>	[I / The employee] [am not / is not / was not] a trainee or apprentice.
<input type="checkbox"/>	[I / The employee] [am / is / was] under an order under section 140 of the Act fixing remuneration and conditions applying to vocational placement.
<input type="checkbox"/>	Neither I, nor to the best of my knowledge and belief, has any other person eligible to make application under section 476(2) of the Act in relation to [myself / the employee] made an application under section 379 or 396 of the Act for the same matter.
<input type="checkbox"/>	The respondent, being an employer within the meaning of the <i>Industrial Relations Act 2016</i> employed me / the employee at: <i>(place where employee was employed)</i>
	as a: <i>(applicant or employee's occupation)</i>
	and [I / the employee] performed the following work: <i>(set out nature of work undertaken)</i>
<input type="checkbox"/>	[I /The former employee] commenced employment with the employer on: <i>(day, month, year)</i>
<input type="checkbox"/>	[I /The former employee] ceased employment with the employer on: <i>(day, month, year)</i>
<input type="checkbox"/>	[I /The former employee] was employed for a continuous period of: <i>(years, weeks, days, hours)</i>
<input type="checkbox"/>	[I /The former employee] terminated [my] [his/her] employment because of: <i>(see section 95(4)(b), Set out material facts, in consecutively numbered paragraphs, in support of claim under section 95(4)(b)(i) or (ii))</i>
<input type="checkbox"/>	The respondent terminated [my] [the former employee's] employment on: <i>(day, month, year)</i>
	<input type="checkbox"/> for a reason other than the employee's conduct, capacity or performance, in that: <i>(see section 95(4)(c). Set out material facts, in consecutively numbered paragraphs in support of claim under section 95(4)(b)(i))</i>
	<input type="checkbox"/> the dismissal was unfair because: <i>(see section 95(4)(c). Set out material facts, in consecutively numbered paragraphs in support of claim under section 95(4)(b)(ii))</i>
<input type="checkbox"/>	[I] [the former employee] was employed under the: <i>(name of industrial instrument or other basis for claim)</i>
<input type="checkbox"/>	[I] [The former employee] state/s that the amount payable and which remains unpaid by

	the respondent is \$
<input type="checkbox"/>	Full particulars of the amount are set out in Schedule 1 attached.

5. Further, I [make oath and say] [solemnly and sincerely affirm and declare]  
 All the facts and circumstances deposed to in this my affidavit are within my own knowledge and belief, except for the facts and circumstances deposed to from information only, and my means of knowledge and sources of information appear on the face of this my affidavit.

6. **Signature**

<b>Signature</b>	
<b>Name</b>	
<b>Date</b>	

**Taken by:**

<b>Sworn/Affirmed by the deponent at:</b>		
<b>on:</b>		
<b>Signature</b>		
<b>Print Name</b>		
<b>Date</b>		
Justice of the peace/commissioner for declarations/lawyer/other qualified person		

**TO RESPONDENT(S):**

**TAKE NOTICE** that if you wish to oppose this application or to argue that any different decision should be made, you must attend before the commission in person or, if appropriate, by your agent at the time on the date and at the place fixed by the registrar or the clerk of the magistrates court and you will be heard. If you do not attend as required a decision may be given against you in terms of the decision sought and costs, where appropriate, without further reference to you. (See R.66, Hearing in respondent's absence).

## **SCHEDULE 1 – PARTICULARS OF AMOUNTS PAYABLE**

*(Schedule 1 must state details of the amounts payable in itemised form showing the dates the amounts claimed, when they became payable, how each calculation was made and the total amount claimed, R.76. The details given must be sufficient to enable the respondent to know the exact nature of the claim being made and how the amount claimed was arrived at).*

--

**Add additional pages if required**