



INDUSTRIAL COURT  
QUEENSLAND

**NUMBER:**

## **Form 5 - Application to appeal**

Industrial Relations Act 2016, Chapter 11, Part 6

Industrial Relations (Tribunals) Rules 2011, rule 8(3) and Part 5

Building and Construction Industry (Portable Long Service Leave) Act 1991, section 89

Child Employment Act 2006, sections 27 and 30

Coal Mining Safety and Health Act 1999, sections 255(3), 258(3)

Contract Cleaning Industry (Portable Long Service Leave) Act 2005, sections 97, 100(1)(a), (b) and 137(3)

Electricity Regulation 2006, section 221

Mining and Quarrying Safety and Health Act 1999, sections 234(3) and 237(3)

Pastoral Workers' Accommodation Act 1980, section 30(2)

Petroleum and Gas (production and Safety) Act 2004, section 837(3)

Private Employment Agents Act 2005, section 47

Trading (Allowable Hours) Act 1990, section 43(4)(d)

Further Education and Training Act 2014, sections 168, 173

Workers' Accommodation Act 1952, section 19(3A)

Workers' Compensation and Rehabilitation Act 2003, section 561

Work Health and Safety Act 2011, sections 65(4), 134(2), 142(4) and 229F

**Version 3**

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

AND

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

This is an appeal to the Industrial Court Queensland against a decision of the [full bench]  
[commission] [industrial magistrate at (*place*)] given on (*date of decision*) in Matter Number

### **1. The Appellant:**

<b>Name of appellant</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</b>			

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

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

**The Appellant's representative**

<b>Organisation</b>			
<b>Contact person</b>			
<b>Postal address</b>			
<b>Suburb</b>		<b>Postcode</b>	
<b>Phone number</b>		<b>Fax number</b>	
<b>Email address</b>			

**2. The Respondent**

The Appellant must serve a copy of this Appeal 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>Email address</b>			

**3. DETAILS OF DECISION SOUGHT:**

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4.  **GROUNDS OF THE APPEAL** (Please complete **Schedule 1**).

5.  **SIGNATURE**

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

**SCHEDULE 1 -**

Using numbered paragraphs, please specify the grounds of the Appeal.

[Empty box for specifying grounds of appeal]

Attach additional pages if required.