



# Form 13 - Application for payment instead of taking long service leave

Industrial Relations Act 2016, section 110

Industrial Relations (Tribunals) Rules 2011, rule 149

seal

## Information

- Use this form to make an application for payment instead of taking long service leave.
- Please read this form carefully. Please complete all relevant sections. Information that is missing or non-compliant with the relevant section of an Act or the Rules may result in the rejection of your form.
- Once this form has been processed the Industrial Registry will contact you and provide you with a sealed copy of the application.
- For information on completing the application see the [EC Application Guide](#) located on our website at [www.qirc.qld.gov.au](http://www.qirc.qld.gov.au)

**PLEASE NOTE:** Practice Direction 3 of 2021 - ELECTRONIC FILING AND HARD COPIES OF DOCUMENTS. Documents which are longer than 30 pages in length must be supplied to the Industrial Registry in hard copy before it will be accepted for filing.

For further information please contact the Industrial Registry on 1300 592 987 or via email at [qirc.registry@qirc.qld.gov.au](mailto:qirc.registry@qirc.qld.gov.au)

This is an application to the Queensland Industrial Relations Commission in accordance with s110 of the *Industrial Relations Act 2016*.

## 1. Applicant

|   |  |                    |          |
|---|--|--------------------|----------|
| <b>Title:</b> (please select)   | <input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Ms <input type="radio"/> Miss <input type="radio"/> Mx <input type="radio"/> Other: |                    |          |
| <b>Name of applicant:</b>   |  |                    |          |
| <b>Postal address:</b>  |  |                    |          |
|   | Suburb/Town  |                    | Postcode |
| <b>Phone number:</b>  |  | <b>Fax number:</b> |          |
| <b>Mobile:</b>  |  |                    |          |
| <b>Email address:</b>   |  |                    |          |
| <b>Does the applicant have a representative?</b>  |  |                    |          |
| 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. |  |                    |          |
| <input type="radio"/> Yes - provide representative's details below and file a Form 33 or 34   |  |                    |          |
| <input type="radio"/> No  |  |                    |          |

| 2. Applicant's representative |             |             |  |
|-------------------------------|-------------|-------------|--|
| Organisation:                 |             |             |  |
| Name of contact person:       |             |             |  |
| Postal address:               |             |             |  |
|                               | Suburb/Town | Postcode    |  |
| Phone number:                 |             | Fax number: |  |
| Mobile:                       |             |             |  |
| Email address:                |             |             |  |

| 3. Interested party (employer)   |             |             |  |
|--|-------------|-------------|--|
| The applicant must serve a copy of this application (without the attachments) on the employer. |             |             |  |
| Name of employer:  |             |             |  |
| Name of contact person:  |             |             |  |
| Postal address:  |             |             |  |
|  | Suburb/Town | Postcode    |  |
| Phone number:  |             | Fax number: |  |
| Mobile:  |             |             |  |
| Email address:   |             |             |  |

| 4. Your employment:   |  |        |                 |
|---|--|--------|-----------------|
| 4.1 What date did you commence employment with your employer?                             | / /  |        |                 |
| 4.2 What date did you become entitled to take long service leave? (see s95(2) of the Act) | / /  |        |                 |
| 4.3 What are the grounds on which you are applying?                                       | <input type="radio"/> Financial Hardship or<br><input type="radio"/> Compassionate |        |                 |
| 4.4 What is the amount of Long Service Leave you are applying for?                        |  |        |                 |
| Hours:  | Days:  | Weeks: | Monetary Value: |

| Signature of person making application: |     |
|---|-----|
| Signature:                              |     |
| Name:                                   |     |
| Date:                                   | / / |