



**Employment Grievance Registration Form [Department of Labour]
Trade Disputes Act Cap 162 – PART 2 Sections (3) (4) & (5)**

Date of Registration:.....

Client No:.....

Employee Details:

Family Name		Sex (Male / Female)	
Middle Name		Age	
First Name		Home island / Citizen	
Date of Birth	Day:	Month:	Year:
Address / Location		Non – Citizen / Nationality	
Home Phone		Trade Union (Y / N)	
Mobile		Occupation / Employment type	
Email		Language (English / French / Bislama) Others	

Year (Yia) Start work	
Year (Yia) Finish work	
TOTAL	

Marital Status	Single	Married	De-facto	Separated	Divorced
Educational level	Primary	Secondary	Tertiary	Vocational	No formal education

Religion (Tick / write)	Christian		Others	
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Employer Details:

Family Name	
Middle Name	
First Name	
Address/ Location	
Email address	
Mobile/Tel:	
Name of Company	
Nature of Employment	

Hours of Work, Days, Wages, Salaries (Tick & Write)

		Amount		Amount
Trial		Hourly	Monthly	
Full-time/ Permanent		Weekly	Fixed	
Part-time (Half days)		Fortnight	Commissions	
Casual (2 – 3 days)		Daily	Piece work	

Work Days OR Nights (Shifts)	From	To	From	To	Total Hours
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
Offs					
Total hours					

Provide copies of one your ID's below (Provaedem Kopi blong wan ID):

- Birth certificate
 - VNPF Card
 - Driving license
 - Passport
 - 1 Passport size photo
 - National Identity Card
 - Last 3 pay slips
 - Written Contract
-
-
-
-
-
-
-
-

Please make a clear statement (Plis mekem wan klia report):

What benefits are you entitled to after termination?

- 1. -----
- 2. -----
- 3. -----
- 4. -----
- 5. -----
- 6. -----

I, _____ trust that the information given is true and correct. I know that incorrect and misleading information is an offence which can lead to Cancellation or Prosecution.

Signature of complainant

Date: _____

Office use only:

Confirmation of document received by the Industrial Unit for the Department of Labour

Print Name

Signature

Date: _____

Notice of Meetings:

Date	Notices of meetings	Outcomes	Review for next step

Dispute Type:

Individual	
Collective	
Dispute of Interest	
Dispute of Right	

Officers Remarks / Comments:
