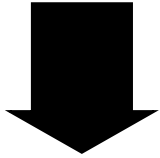


WPS - FORM : 1
(WOOD & PAPER SECTOR)



PART A
REFERRING A DISPUTE TO
THE NBCWPS FOR CONCILIATION
AND ARBITRATION



National Bargaining Council
For the Wood and Paper Sector

WHO FILLS IN THIS FORM?

Employer, employee, trade union or employer organization.

WHERE DOES THIS FORM GO?

**NATIONAL BARGAINING COUNCIL FOR THE WOOD AND PAPER SECTOR
(NBCWPS) OFFICES:**

26 Loveday Street
CCMA House, 7th Floor
Johannesburg
2001

P.O.Box 62670
Marshalltown
2107

TEL: (011) 832 2080

FAX: (011) 832 2288

EMAIL: info@nbcwps.org.za

WHAT WILL HAPPEN WHEN THIS FORM IS SUBMITTED?

When you refer the dispute to the NBCWPS, it will appoint a panelist from the NBCWPS panel who will attempt to resolve the dispute. If the parties to the dispute have agreed on a particular NBCWPS panelist, the NBCWPS will appoint that panelist (provided the panelist is available).

OTHER INSTRUCTIONS

Please note that the following disputes must be forwarded directly to the CCMA, and cannot be dealt with by a bargaining council in terms of the Labour Relations Act, no 66 of 1995 ("the LRA"):

- Disclosure of information (Section 16 and 89 of the LRA)
- Organisational rights (Chapter III part A of the LRA)
- Agency shop disputes (Section 25 of the LRA)
- Closed shop disputes (Section 26 of the LRA)
- Interpretation or application of collective bargaining provisions (Section 63 (1) of the LRA)
- Picketing disputes (Section 69 of the LRA)
- Workplace forum disputes (Sections 86 and 94 of the LRA)
- Facilitation – Operational Requirements (Section 189A of the LRA)

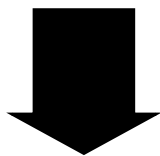
FURTHER OTHER INSTRUCTIONS

A copy of this form must be served on the other party:

Proof that a copy of this form has been served on the other party must be supplied by attaching:

- A copy of a registered slip from the Post Office;
- A copy of a signed receipt if hand delivered;
- A signed affidavit confirming service by the person delivering the form;
- A copy of a fax confirmation slip; or
- Any other satisfactory proof of service.

READ THIS FIRST



Tick the correct box

The name of the employee or an employer that is referring the dispute must be filled in (a). If there is more than one employee to the dispute and the referring party is not a trade union, then each employee must supply their personal details and signature on a separate page, which must be attached to this form.

These alternate contact details should be of a union official or representative, a relative or a friend.

The name of the trade union or employers organisation that is referring the dispute or assisting a member to refer a dispute must be filled in (b).

OTHER PARTIES

If more than one party is referring the dispute or if the dispute is referred against more than one party, write down the additional names and particulars on a separate page and attach this page to this form.

Tick the correct box

1. DETAILS OF PARTY REFERRING THE DISPUTE

As the referring party, are you:

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> An employee | <input type="checkbox"/> A trade union (admitted to the NBCWPS) |
| | <input type="checkbox"/> A trade union (not admitted to the NBCWPS) |
| <input type="checkbox"/> An employer | <input type="checkbox"/> An employer's organisation(admitted to the NBCWPS) |
| | <input type="checkbox"/> An employer's organisation(not admitted to the NBCWPS) |

(a) Name and details of the referring party :

Name:.....
 ID Number:.....
 Postal Address:.....
Postal Code:.....
 Tel:.....Cell:.....
 Fax:..... Email:

(b) Alternate contact details of the referring party:

Name:.....
 Postal Address:.....
Postal Code:.....
 Tel:.....Cell:.....
 Fax:..... Email:

2. DETAILS OF THE OTHER PARTY (PARTY WITH WHOM YOU ARE IN DISPUTE)

The other party is:

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> An employee | <input type="checkbox"/> A trade union (admitted to the NBCWPS) |
| | <input type="checkbox"/> A trade union (not admitted to the NBCWPS) |
| <input type="checkbox"/> An employer | <input type="checkbox"/> An employer's organisation (admitted to the NBCWPS) |
| | <input type="checkbox"/> An employers' organisation(not admitted to the NBCWPS) |

Name:.....
 Postal Address:.....
Postal Code:.....
 Tel:.....Cell:.....
 Fax:..... Email:

Please turn over

Tick the correct box

If the dispute concerns dismissal, also complete Part B (See Page 5) of this form.

This section must be completed!

If necessary write the details on a separate page and attach to this form.

This section must be completed!

If necessary write the details on a separate page and attach to this form.

UNFAIR LABOUR PRACTICE

If the dispute(s) concerns an unfair labour practice the dispute must be referred (ie. received by the NBCWPS) within 90 days of the act or omission which gave rise to the unfair labour practice. If more than 90 days have elapsed you are required to apply for condonation.

3. NATURE OF THE DISPUTE

What is the dispute about (tick only one box)?

<input type="checkbox"/> Unfair dismissal	<input type="checkbox"/> Unfair Labour Practice <i>(Give details)</i>	<input type="checkbox"/> Refusal to Bargain
<input type="checkbox"/> Unfair dismissal (probation)	<input type="checkbox"/> Mutual Interest	<input type="checkbox"/> Unfair Labour Practice (probation)
<input type="checkbox"/> Unilateral change to terms and conditions of employment	<input type="checkbox"/> Severance pay S41 BCEA	<input type="checkbox"/> Freedom of Association
<input type="checkbox"/> Interpretation/ Application of Collective Agreement	<input type="checkbox"/> Section 80 of the BCEA	<input type="checkbox"/> Other <i>(please describe)</i>

Summarise the facts of the dispute you are referring:

.....

.....

.....

4. DATE DISPUTE AROSE

The dispute arose on:.....
(give the date, day, month and year)

The dispute arose where:.....
(give the city/town in which the dispute)

If the dispute concerns a dismissal the date inserted here must be the same as that set out in Item 2 of Part B of this form.

5. DETAILS OF DISPUTE PROCEDURES FOLLOWED

Have you followed all internal grievance / disciplinary procedures before coming to the NBCWPS? YES NO

Describe the procedures followed:.....

.....

.....

.....

.....

6. RESULT OF CONCILIATION

What outcome do you require?.....

.....

.....

.....

Please turn over

