

Federal
Public
Sector
Labour
Relations and
Employment
Board

Commission des
relations de
travail et de
l'emploi dans le
secteur
public
fédéral

F.P.S.L.R.E.B. File Number
FOR OFFICE USE ONLY

Form 7.1

*Section 46.1
of the Federal Public Sector Labour Relations Regulations*

**APPLICATION TO CHANGE THE APPLICABLE
DISPUTE RESOLUTION PROCESS**

Federal Public Sector Labour Relations Act

NOTICE: (1) The original and four copies of this request must be filed with the Board.

1. Bargaining agent information:

Name:

Mailing address:

Apartment (if applicable): _____ Number and street: _____

City: _____ Province or Territory: _____ Postal code: _____

Name of authorized representative:

Mailing address (if different from above):

Apartment (if applicable): _____ Number and street: _____

City: _____ Province or Territory: _____ Postal code: _____

Telephone number: (____) _____ Fax number: (____) _____

E-mail address: _____

2. Employer information:

Name:

Mailing address:

Apartment (if applicable): _____ Number and street: _____

City: _____ Province or Territory: _____ Postal code: _____

**Where information on more than one person is required in a section or the space provided
is not sufficient, please attach additional pages of same-sized paper.**

Name of authorized representative:

Mailing address (if different from above):

Apartment (if applicable): _____ Number and street: _____

City: _____ Province or Territory: _____ Postal code: _____

Telephone number: (____) _____ Fax number: (____) _____

E-mail address:

3. Detailed description of the bargaining unit in respect of which the choice is made:

4. Dispute resolution process chosen last recorded by the Board described in section 3 :

arbitration

conciliation

5. Desired change:

arbitration

conciliation

Date: _____
(dd/mm/yyyy)

(Signature of authorized representative)
