



## Form 4

### Application for Intervenor Status

Subs. 19(2), Public Service Staffing Complaints Regulations

Please note:

1. For information regarding the complaint process, consult the FPSLREB web site at: [www.fpslreb-crtespf.gc.ca](http://www.fpslreb-crtespf.gc.ca)
2. The addresses you provide will be disclosed to other parties to the complaint.
3. A copy of your application will be forwarded to the other parties, intervenors, if any, and the Canadian Human Rights Commission, if applicable.
4. The FPSLREB will take the following factors into consideration in deciding whether or not to grant intervenor status [subs. 19(4), Regulations]:
  - whether the applicant is directly affected by the proceeding;
  - whether the applicant's position is already represented in the proceeding;
  - whether the public interest or the interests of justice would be served by allowing the applicant to intervene; and
  - whether the input of the applicant would assist the FPSLREB in deciding the matter.

#### Information about applicant

|   |           |                                   |          |         |
|---|-----------|-----------------------------------|----------|---------|
| <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. | Last name |                                   |          |         |
| First Name  |           | Middle name(s)                    |          |         |
| Mailing address (see Note 2 above)  |           | City                              | Province | Country |
| Work phone no.  |           | Facsimile                         |          |         |
| Department or Agency  |           | Branch/Sector                     |          |         |
| Work location   |           | Position title and classification |          |         |
| E-mail address  |           |                                   |          |         |

#### Information about representative (if applicable)

|   |                      |                |          |             |
|---|----------------------|----------------|----------|-------------|
| <input type="checkbox"/> Union <input type="checkbox"/> Lawyer <input type="checkbox"/> Other | Name of organization |                |          |             |
| <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.       | Last name            |                |          |             |
| First Name  |                      | Middle name(s) |          |             |
| Mailing address   |                      | City           | Province | Postal code |
| Work phone no.  |                      | Cell phone no. |          |             |
| E-mail address  |                      | Facsimile      |          |             |

## Information about the application for intervenor status

FPSLREB file no.:

Please explain the reasons for your request for intervenor status in the above-mentioned complaint, including the grounds for intervention, your interest in the matter and the contribution you expect to make if granted intervenor status. Add additional pages, if necessary.

Signature

Date

Send completed form, preferably by email or facsimile, to the Federal Public Sector Labour Relations and Employment Board, at: E-mail:

[director.directeur@fpslreb-crtespf.gc.ca](mailto:director.directeur@fpslreb-crtespf.gc.ca)

Facsimile: (613) 990-1849

or

Federal Public Sector Labour Relations and Employment Board

240 Sparks Street, 6th Floor West

Ottawa ON K1A 0A5