



Form 8

Request to Add or Amend Allegations

Subs. 23(2), Public Service Staffing Complaints Regulations

Please note:

1. For information regarding the complaint process, consult your union representative, HR specialist or the FPSLREB web site at: www.fpslreb-crtespf.gc.ca.
2. The addresses you provide will be disclosed to other parties to the complaint.
3. You must provide a copy of this form to the other parties, intervenors, if any, and the Canadian Human Rights Commission, if applicable.
4. If you wish to raise an issue involving the interpretation or application of the Canadian Human Rights Act, you must give notice to the CHRC. You may use Form 5 for this purpose.
5. The FPSLREB will consider whether or not the new or amended allegation results from information that could have been obtained before the original allegations were submitted.

Complainant Information

| | | | | | |
|---|-----------|-----------------------------------|----------|---------|-------------|
| <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 | Postal code |
| 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 complaint

FPSLREB file no.:

Please explain fully why new allegations need to be added to your complaint document or why the original allegations need to be amended.
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
Facsimile: (613) 990-1849
or
Federal Public Sector Labour Relations and Employment Board
240 Sparks Street, 6th Floor West
Ottawa ON K1A 0A5