

PUBLIC SERVICE LABOUR RELATIONS ACT

**APPLICATION FOR CERTIFICATION BY INTERVENER
BEFORE THE LABOUR AND EMPLOYMENT BOARD**

FORM R-7A

P.S.L.R.B. File

1. APPLICANT, Name

EMPLOYER, Name and Address

INTERVENER, Name and Address

2. * Strike out if not applicable. - Where the intervener is a council of employee organizations, state the name and address of each constituent employee organization.

3. (a) Detailed description of the unit of employees of the employer that the intervener proposes as appropriate for collective bargaining.

(b) Estimate the number of employees in the proposed bargaining unit.

(c) Indicate briefly nature of evidence available to support claim made in 3(b) above.

4. (If you propose a bargaining unit different than the one proposed by the applicant): The grounds on which you intend to rely to show that the bargaining unit described in the application of the applicant is not appropriate or that the bargaining unit proposed in 3(a) above is more appropriate than the one proposed by the applicant.

5. Other relevant statements in support of this intervention.

Dated at , this day of 20. , and signed on behalf of the intervener by -

.....
Signature

.....
Signature

.....
Office held in employee organization

.....
Office held in employee organization

NOTE: Where the intervener desires to list persons whom it considers to be employed in a managerial or confidential capacity it may do so by filing together with its application a list setting out the name of each such person identifying the department or portion of the Public Service in which such persons are employed, subdivided so that each subdivision corresponds to a paragraph in the definition of “person employed in a managerial or confidential capacity” in section 1 of the Act.

DECLARATION

I/We declare that the answers and information contained in the foregoing intervener’s application are true in substance and in fact. I/We further declare that I/We have been duly authorized to make this application. And I/We make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath, and by virtue of the *Evidence Act*.

Declared by the said

..... and

Before me at

in the County of

.....
Signature

and Province of

this day of , 20.

.....
Signature

(To be declared before a commissioner of oaths or any other person authorized by law to administer an oath.)