

Application for Representation CPSU's Entitlements & Compliance Specialist Team

: (03) 9639 1822 OR 1800 810 153 (toll free) : (03) 9662 4591

: enquiry@cpsuvic.org

Postal 4/128 Exhibition Street Melbourne Victoria 3000 PO Box 24233

Your Details (if know	wn)			
Name		Member no		
Phone		Classification		
Email		Title/role		
Preferred contact meth	od	<u>'</u>		
Your Workplace				
Agency name				
Workplace name and				
address				
Line manager			Phone	
Local delegate			Phone	
Outline of Issues (e.g. grievance, discipline, dis	smissal. OHS, bullying, workload, leave. etc.)			
Resolution sought (Briefly outline relief – e.g. de	ecision reversed, entitlement repaid, etc			
Action taken so fa	r			
Action taken so fa				
Action taken so fa (What have you done at loca				

Please ensure you:

- Provide your preferred method of contact and the relevant details
- Provide the name and number of the relevant decision maker
- Attach copies of relevant documentation
- Advise your CPSU Workplace Delegate of your issue
- Contact CPSU **before** you communicate any further with your employer about this matter.

CPSU assesses each application on its merits and reserves the right to proceed, and may at any time discontinue representation.

Office use only				
Date recd.	Case no.			
File no.	Officer			
Date joined				
Notes				

Signed _____