**LABOUR AND EMPLOYMENT RELATIONS GRIEVANCE FORM**

***(PEPA FAATUMU MO TALOSAGA FAASEA O MATAUPU TAU LEIPA MA GALUEGA)***

Date of complaint registration ***(Aso ua faaulu mai ai le faasea)*:** \_\_\_ / \_\_\_ / \_\_\_

|  |  |
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| **EMPLOYEE/COMPLAINANT DETAILS (FAAMAUMAUGA A LE O LOO FAASEA)** | |
| Full Name of Complainant  ***(Suafa atoa o le e ona le talosaga)*** |  |
| Date of Birth  ***(Aso Soifua)*** |  |
| Gender  ***(Kanela – Alii/Tamaita’i)*** |  |
| Village  ***(Nu’u)*** |  |
| Contact number(s)  ***(Numera Telefoni)*** |  |

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| **EMPLOYER DETAILS (FAAMAUMAUGA O LE FALE FAIGALUEGA)** | |
| Employer  ***(Fale Faigaluega)*** |  |
| Name of General Manager  ***(Suafa atoa o le e ona le Galuega)*** |  |
| Address of Employer  ***(Tuatusi ole Fale Faigaluega)*** |  |
| Contact number(s)  ***(Numera Telefoni)*** |  |

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| **EMPLOYEE EMPLOYMENT HISTORY (TALAAGA O LE SOIFUA GALUE A LE O LOO FAASEA)** | |
| Position held by complainant  ***(Igoa o le avanoa faigaluega)*** |  |
| Tick type of employment  ***(Togi le tulaga faigaluega)*** | Piece worker ***(Galuega Fai Vaega)***  Part-timer ***(Galuega Faavaitaimi)***  Shift worker ***(Galuega Fai Sifi)***  Permanent – full time ***(Galuega Tumau)***  Contract Employment – Manager / Supervisor ***(Galuega Faakonekarate - Tulaga Faa-Pule o Galuega)*** |
| Start Date ***(Aso na amata ai)*** |  |
| End Date ***(Aso Na Faamuta ai)*** |  |
| Rate of Pay  ***(Totogi)*** | Hourly ***(Itula)*:** **$**\_\_\_\_\_\_\_\_\_\_\_\_\_  Weekly ***(Vaiaso)*:** **$**\_\_\_\_\_\_\_\_\_\_\_\_\_  Fortnightly ***(Lua Vaiaso)*:** **$**\_\_\_\_\_\_\_\_\_\_\_\_\_  Annual ***(Tausaga)*:** **$**\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**COMPLAINANT STATEMENT**

***(FAAMATALAGA A LE O LOO FAASEA)***

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Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(Igoa)*** ***(Sainia)***

Date: \_\_\_ / \_\_\_ / \_\_\_

***(Aso ua sainia ):***

***OFFICE USE ONLY***

Type of complaint:

Industrial Grievance (Individual)

Industrial Dispute

Tick appropriate box for the next action to be taken by the Labour Inspector:

Advise

Preliminary assessment

Other

*If you tick advise, note advise provided to employee and close case:*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_