

Form F48 – Application for directions on procedure

Fair Work Commission Rules 2013, Rule 7

This is an application to the Fair Work Commission for directions about procedure in relation to a matter in accordance with the [Fair Work Act 2009](#).

The Applicant



These are the details of the person who is making this application. The applicant for directions on procedure may be different from the applicant in the matter before the Commission.

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other please specify:		
First name(s)			
Surname			
Postal address	Level 1, 365 Queen Street		
Suburb	Melbourne		
State or territory	Victoria	Postcode	3000
Phone number	(03) 9602 8500	Fax number	(03) 9602 8567
Email address	kwischer@anmf.org.au		

If the Applicant is a company or organisation

If the Applicant is a company or organisation please also provide the following details

Legal name of Applicant	AUSTRALIAN NURSING AND MIDWIFERY FEDERATION
Applicant's trading name or registered business name	
Applicant's ACN (if a company)	

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Applicant's ABN (if applicable)	41 816 898 298
Contact person	KRISTEN WISCHER

Does the Applicant need an interpreter?



If you have trouble accessing this information, please contact us. We can arrange to provide it in another format. You can find information about [help for non-English speakers](#) on our website.

Yes – Specify language

No

Does the Applicant require any special assistance at the hearing or conference (eg a hearing loop)?

Yes – Please specify the assistance required

No

Does the Applicant have a representative?



A representative is a person or organisation who is representing the Applicant. This might be a lawyer or paid agent, a union or employer organisation, or a family member or friend. There is no requirement to have a representative.

Yes – Provide representative's details below

No

Applicant's representative



These are the details of the person or organisation who is representing the Applicant (if any).

Name of person	NICHOLAS WHITE
Firm, organisation or company	GORDON LEGAL
Postal address	Level 22, 181 William Street

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Suburb	Melbourne		
State or territory	Victoria	Postcode	3000
Phone number	(03) 9603 3035	Fax number	(03) 9603 3050
Email address	nwhite@gordonlegal.com.au		

Is the Applicant’s representative a lawyer or paid agent?

Yes

No

The other party



These are the details of the other party in the matter.

Title	[] Mr [] Mrs [] Ms [] Other please specify:		
First name(s)			
Surname			
Postal address			
Suburb			
State or territory		Postcode	
Phone number		Fax number	
Email address			

If the other party is an organisation

If the other party is an organisation please also provide the following details

Legal name of organisation	
Trading name of	

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organisation	
ABN/ACN	
Contact person	

1. Preliminary

1.1 Are you seeking directions for an existing matter?

Yes – Go to 1.2

No – Go to 1.3

1.2 What is the name and matter number for the matter?

1.3 What is the type of matter that you want to initiate?

Briefly, provide the details of the type of matter.

The Applicant has lodged an application to vary a modern award under section 158 of the *Fair Work Act 2009*.

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2. Reasons for seeking directions

2.1 Why are you applying to the Commission for directions?

[X] The procedure is not prescribed by the FW Act, the Fair Work Commission Rules, the regulations or any other Act or regulations. Provide details below.

[] You are in doubt about the proper procedure to follow. Provide details below.

Rule 49 of the *Fair Work Commission Rules 2013* (“the Rules”) provides: “An applicant who has lodged an application to vary a modern award under Division 5 of Part 2-3 of Chapter 2 of the Act must apply to the Commission under rule 7 for directions about the procedure to be followed in relation to service of the application.”

This is an application under rule 7 of the Rules for directions about the procedure to be followed in relation to service of the Applicant’s application to vary a modern award.

3. Proposed directions.

Set out your proposed directions you are seeking, if any (optional).

The Applicant applies for directions to the effect that:

1. The Commission will bring the application to the attention of interested parties by:
 - (a) posting the application on the Commission’s website; and
 - (b) emailing notifications to subscribers to the award.
2. The matter be listed for a case management conference on a date to be fixed.

Signature



If you are completing this form electronically and you do not have an electronic signature you can attach, it is sufficient to type your name in the signature field. You must still complete all the fields below.

Signature	
Name	NICHOLAS WHITE, GORDON LEGAL
Date	9 February 2024
Capacity/Position	Applicant’s representative

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Where this form is not being completed and signed by the Respondent, include the name of the person who is completing the form on their behalf in the **Capacity/Position** section.

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR OWN RECORDS