

Form F8 – General protections application involving dismissal

Fair Work Act 2009, s.365

This is an application for the Fair Work Commission (Commission) to deal with a general protections dispute involving dismissal under Part 3-1 of the [Fair Work Act 2009](#).

The Applicant (you)



These are the details of the person who has been dismissed. Make sure you provide a telephone number for the conciliation conference.

Title	[] Mr [] Mrs [X] Ms [] Other please specify:		
First name(s)	Jane		
Surname	Smith		
Postal address	1 Lane Street		
Suburb	Melbourne		
State or territory	VIC	Postcode	3000
Phone number		Fax number	
Mobile number	0123 456 789		
Email address	j.smith@email.com		

Note: If you provide a mobile number the Commission may send reminders to you via SMS.

If the Applicant is an industrial association please also provide the following information



If the Applicant is an industrial association, provide the name of the association and the name of the person who represents the employee who was dismissed.

This question is only for industrial associations (for example, a union). If you are the person who was dismissed, leave this blank.

Name of association	
Contact person	
Phone number	
Email address	

Only answer this question if you are an industrial association making this application as the applicant. Do not answer it if you are an industrial association representing an applicant.

How would you prefer us to communicate with you?

- Email (you will need to make sure you check your email account regularly)
- Post

Do you 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

Do you need any special assistance at the hearing or conference (eg a hearing loop)?

- Yes – Please specify the assistance required
- No

Do you have a representative?



A representative is a person or organisation or paid agent, a union or a family member representative.

You don't have to have a representative. About half the people who come to the Commission don't have one. We have information and resources to help you run your own case.

- Yes – Provide representative's details below
- No

Your representative



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

You can send us this information later if you don't know it yet or if you decide later you want to be represented

Name of person			
Firm, union or company			
Postal address			
Suburb			
State or territory		Postcode	
Phone number		Fax number	
Email address			

Is your representative a lawyer or paid agent?

- Yes
- No

The Respondent (the employer)



These are the details of the employer that dismissed you.

You should provide the legal name of the employer. The legal name is not the trading name or business name of the employer. The legal name is the name of the company or company (with a name ending in Pty Ltd or Ltd), a partnership, a trade union, a professional association, or a public sector employer. You should provide the legal name of the employer as it appears on your appointment letter or employment contract.

Note that the Commission will send a copy of your application to the contact person you name below.

You can look for your employer's **ABN** or **ACN** on your pay slips or PAYG summary. You can also try searching the company name on [ABN Look up](#).

Every business should have an ABN. Companies should also have an ACN.

Legal name of employer	Working Company Pty Ltd
Employer's ACN (if a company)	123 456 789
ABN	
Contact person	Paula Jones
Postal address	100 The Avenue
Suburb	Melbourne
State or territory	VIC
Phone number	(03) 9876 5432
Email address	p.jones@theworkingcompany.com

The **contact person** is the person at the business we should speak to about your case. It could be the owner of the business, a manager or someone in HR.

Providing a contact name and direct contact details will help us move your case forward to the next stage. If you're not sure who the best person is, make your best suggestion. It can always be changed later.

1. General protections dismissal

1.1 What date did you begin working for the employer?

12 May 2017

This is usually the first day you worked. If you're not sure what the exact date was, make your best guess.

1.2 What date were you notified of your dismissal?

16 June 2022

This is the date you were first told by the employer that you were being dismissed. This could have been by email, over the phone or in person.

1.3 What date did your dismissal take effect?

16 June 2022

This is usually the last day you worked. It might be later if you were still getting paid after you stopped going to work, for example, if you were on paid leave when you were dismissed.

1.4 Are you making this application within 21 calendar days of your dismissal taking effect?

Yes

No



For information about the timeframe for lodgment of general protections applications involving dismissal, see section 366(1) of the [Fair Work Act 2009](#).

If you answered **No** – Explain the reason for the delay, including any steps you have taken to dispute the dismissal or any other reason you think the Commission should take into account in considering whether to accept your application out of time.

The Commission will provide a copy of all completed applications to the employer, even if it is out of time. This **does not** mean the application has been *accepted*.

Only a Commission Member can decide whether to accept your application out of time, after they complete a formal review.

1.5 To the best of your knowledge, how many employees were employed in your workplace when you were dismissed?

1-14

15-49

50-99

100 or more

I don't know

1.6 Have you made another claim to the Commission or to any other organisation regarding your dismissal (eg an unfair dismissal application)?



The Commission cannot consider your general protections application involving dismissal if you have made another claim in relation to your dismissal, such as an unfair dismissal application or a complaint to the Australian Human Rights Commission. If you answer yes to this question, you will need to decide which claim is the most appropriate one. If you're unsure which is the best option for you, read the **where to get help** section in the cover sheet of this form.

Yes

No

2. Remedy

2.1 What outcome are you seeking by lodging this application?

Compensation for losing my job
Separation certificate
Statement of service

Typical settlements can include one or more of the following:

- Reinstatement (the employee gets their job back)
- monetary settlement
- a statement of service (stating how long the employee worked for the employer and what they did) or a reference
- payment of owed entitlements
- an apology
- the dismissal being treated as a resignation
- a non-disparagement agreement (where neither party can bad-mouth the other)
- anything else agreed to by the parties.

3. Alleged contravention

3.1 Describe the actions of the employer, including any steps taken, that have led you to make this application.

Using numbered paragraphs, describe the relevant facts and circumstances. Specify the **reason(s), if any, given by the employer** for your dismissal. Attach any letter of dismissal and/or separation certificate given to you by the employer. Note that the Commission will send copies of any documents you provide to the employer. Attach extra pages if necessary.

1. Paula told me that I had taken too much time off work and I should work through my lunch break if I can't get through all my work.
2. I always provide medical certificates for the days I call in sick.
3. I told Paula that I have too much work to do and not enough support to get it done.
4. I also told Paula that I'm entitled to have lunch breaks and use my personal leave but she fired me anyway and told me to go home.

3.2 Which section(s) of the Fair Work Act 2009 did the employer contravene when they took, threatened or organised the above actions against you?



A general protections application should only be made if your employer took adverse action against you **because** you have the protections described in one or more sections of the [Fair Work Act 2009](#) listed below. See the [General Protections Benchbook](#) for information about each of the protections below.

This section lists the protected actions that are covered under the F8 application. Tick the box(es) that apply to your situation.

Division 3 – Workplace rights

- s.340 Protection
- s.343 Coercion
- s.344 Undue influence or pressure

Division 4 – Industrial activities

- s.346 Protection
- s.348 Coercion

Division 5 – Other protections

- s.351 Discrimination

Please specify the attribute as set out in section s.351(1):

- s.352 Temporary absence – illness or injury

Division 6 – Sham arrangements

- s.358 Dismissing to engage as an independent contractor

3.3 Explain how the actions you have described in question 3.1 have contravened the section(s) of the Fair Work Act 2009 you identified in question 3.2.

s.340: our Enterprise Agreement states that I am entitled to a 30-minute lunch break if I work for more than 5 hours. I work 8 hours a day, so it is my workplace right to take a lunch break.

s.352: I was temporarily absent from work and used my personal leave because I was unwell. I even provided medical certificates each time I used my sick leave.

Paula fired me because I used my entitlements.

Attach extra pages if necessary.

Disclosure of information

The Commission will provide a copy of this application and any attachments to the other parties in this matter. This includes:

- the employer
- any legal representatives.

Consent to contact by researchers



The Commission undertakes research with participants in general protections dismissal matters to ensure a high quality process. Some research may be undertaken by external providers on behalf of the Commission.

Do you consent to the contact details provided on page 1 of this form being provided to an external provider of research services for the sole purpose of inviting you to participate in research?

Yes

No

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	Jane Smith
Name	Jane Smith
Capacity/ Position	
Date	30 June 2022

If you have completed and signed the form yourself, leave the Capacity/Position field blank.

If someone else has filled in the form for you, their signature and name goes in this section. Their **capacity** or **position** is the relationship they have to you. For example, your lawyer, union representative, parent or guardian.

If you are not the Applicant and are completing and signing this form on the Applicant's behalf, include an explanation of your authority to do so in the Capacity/Position section above.

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR OWN RECORDS