Form A31

Application to Appeal Registrar’s decision

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| **Case Number**  (SAET use only) |  |

### About this form

* This is the approved form to appeal a decision of a SAET Registrar.
* Submitting an incomplete form (including any relevant supporting documents) may result in delays.

# LEGISLATIVE PROVISIONS

This application is made pursuant to:

|  |  |
| --- | --- |
| Legislation (Act and section) |  |

# Party details

## Applicant

|  |  |  |  |
| --- | --- | --- | --- |
| Title | Mr  Mrs  Miss  Ms  Other (specify): | | |
| First name |  | Last name |  |
| Email |  | | |
| Telephone |  | Mobile |  |
| Address Street 1 |  | | |
| Street 2 |  | | |
| Suburb |  | State |  |
| Postcode |  | Country |  |
| Do you require an interpreter? | No  Yes. Please specify language: | | |
| Do you haver any special requirements which will require assistance? | No  Yes. Please specify: | | |
| Is anyone representing you? | No  Yes. Please specify: | | |

### Representative detail (if required)

|  |  |  |  |
| --- | --- | --- | --- |
| Organisation |  | | |
| Contact First name |  | Last name |  |
| Email |  | | |
| Telephone |  | Mobile |  |
| Address Street 1 |  | | |
| Street 2 |  | | |
| Suburb |  | State |  |
| Postcode |  | Country |  |

## Respondent

|  |  |  |  |
| --- | --- | --- | --- |
| Organisation |  | | |
| Contact Title | Mr  Mrs  Miss  Ms  Other (specify): | | |
| First name |  | Last name |  |
| Email |  | | |
| Telephone |  | Mobile |  |
| Address Street 1 |  | | |
| Street 2 |  | | |
| Suburb |  | State |  |
| Postcode |  | Country |  |

# Notice of appeal

TAKE NOTICE that an appeal is hereby made by:

[*Set out name and address of each of the appellants to the appeal*]

to SAET against the award / order / decision / omission / failure / refusal made / which:

|  |  |
| --- | --- |
| * occurred on the (Date): |  |
| * by (name of member): |  |
| * whereby [*set out brief description of matter complained of including the specific part or parts of any award or decision appealed against or of the relevant omission, failure, refusal or illegality*] |  |

## Grounds of appeal

The grounds of appeal are:

*Unless SAET otherwise directs, an appellant may not rely on grounds that are not stated in the notice of appeal.* *Specify grounds in successively marked paragraphs*.

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## Extension of time for appeal

The applicant seeks an extension of time within which to appeal, upon the following grounds:

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|  |

## Order or Directions Sought

Set out relief sought in successively numbered paragraphs. A request for a **stay** of operation, where appropriate, may be included in the Notice of Appeal. Alternatively the application may be made separately by interlocutory application.

The appellant/s seek/s the following orders on the appeal:

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|  |

# LODGING YOUR COMPLETED FORM

The person lodging this form must send a copy to all other party/ies.

|  |  |
| --- | --- |
| Name of person lodging |  |
| Signature |  |
| Date |  |

Please lodge this form, together with any accompanying documents, with the South Australian Employment Tribunal:

Email: [saet@sa.gov.au](mailto:saet@sa.gov.au)  
Post: PO Box 3636, Rundle Mall, SA, 5000  
In person: Level 6, Riverside Centre, North Terrace, Adelaide, 5000

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| --- |
| **PLEASE RETAIN A COPY OF THIS FORM FOR YOUR OWN RECORDS** |