

APPLICATION TO RESOLVE DISPUTE (TRAINING AND SKILLS DEVELOPMENT)

Section 65 *Training and Skills Development Act 2008*

SOUTH
AUSTRALIAN
**EMPLOYMENT
TRIBUNAL**

Case number (SAET use only)

About this form

- This is the approved form to apply for SAET to resolve a dispute between parties to a training contract under section 65 of the *Training and Skills Development Act 2008*.
- In accordance with section 67 of the *Training and Skills Development Act 2008*, a party may not be represented by a lawyer or 'registered agent'. SAET may permit a party to be assisted by a person, who is not a lawyer or 'registered agent' only if that person is not acting for fee or reward.
- This form may be completed electronically and lodged as an email attachment (not a scan). A signature is not required.

1 OTHER PROCEEDINGS BEFORE SAET

Are there any other proceedings before SAET involving the same parties to this application?

If Yes, provide Case number

 No Yes

2 PARTIES (SUMMARY) *DO NOT COMPLETE*

This section will auto-populate with details you provide in [Attachment 1 - Parties \(Detail\)](#) (enclosed at the end of this form) which must be completed prior to lodgement.

Name (Party type)	Contact's last name
Applicant	
Representative (if applicable)	
Respondent	
Guardian of apprentice / trainee (if applicable)	
Other party	
Training and Skills Commission	Training and Skills Commission (Training Authority)

If there are more parties to this application than this form provides for, please also complete an 'A10 - Details of Additional Party' (available from www.saet.sa.gov.au) form for all other parties and submit with your application.

3 TRAINING CONTRACT DETAILS

Contract of Training number

Are copies of the [training contract](#) and [training plan](#) attached to this application?
 Yes No – outline reasons why not

4 APPLICATION DETAILS

Extension of time

Is this application being lodged within 6 months of the expiry, termination or cancellation of the training contract?

Yes No – set out in detail the reasons why an extension should be granted.

Description of the dispute

Outline the events that resulted in the dispute. Only a brief outline is required, as all parties will have an opportunity to provide further detail at a conciliation conference. Attach any other attachments that support this application.

Outcome sought

Outline what you want to achieve from the proceedings

Supporting attachments

Provide a brief description of any attachments supporting this application.

5 LODGING YOUR COMPLETED FORM

By lodging this application, I declare that:

- I am the applicant or I am legally authorised to lodge this application
- To the best of my knowledge, all information provided in this application is true and correct
- I will attach all relevant supporting documents to this application form
- I understand that the information provided will be used to determine eligibility to initiate proceedings
- I understand that a copy of this application, and any supporting documents, may be sent to others who may have a direct interest in the proceedings. The *South Australian Employment Tribunal Act 2014* governs what information is available to be viewed publicly.

Name of person lodging the application

Date

To lodge your completed form:

1. **Save** it to your computer - SAET does not require a signed version so there is no need to print and scan
2. **Email** it with any supporting documents to saet@sa.gov.au.

Ensure you complete Attachment 1: Party (Detail) enclosed over the page

ATTACHMENT 1 - PARTIES (DETAIL)

A. Applicant

Are you (the Applicant) the: Apprentice Trainee Employer

Are you (the Applicant) an individual or lodging on behalf of an organisation?

Individual

Organisation – specify Organisation legal name

Organisation trading name

Contact details

Title Given name Other given names Family name

Job title Date of birth (individual parties only)

Unit number Street number Street name / PO Box Street type (eg Street, Road, Drive)

Suburb State Postcode

Phone Mobile Email (if provided, correspondence will be emailed)

Do you require an interpreter?

No Yes – specify language / dialect

Do you have any other special requirements?

No Yes – specify requirements

Applicant representative details

Note: In accordance with section 67 of the *Training and Skills Development Act 2008*, a party may not be represented by a lawyer or 'registered agent'. SAET may permit a party to be assisted by a person, who is not a lawyer or 'registered agent' only if that person is not acting for fee or reward.

Special note about the Training Advocate –If the Training Advocate will attend the Tribunal with you to provide support and assistance, DO NOT COMPLETE THIS SECTION. You should include them as an 'other party' on page 6.

Are you (the Applicant) represented?

Yes No – go to **B Respondent**

Type of representative

Union (non-lawyer) Employer association (non-lawyer) Not specified

Is the representative an individual or acting on behalf of a representative organisation?

Individual

Organisation – specify Representative organisation name

Representative contact details

Title Given name Family name

Unit number Street number Street name / PO Box Street type (eg Street, Road, Drive)

Suburb State Postcode

Phone Mobile Email (if provided, correspondence will be emailed)

B. Respondent

Respondent is the:

- Apprentice Trainee Employer

Respondent is an:

- Individual
 Organisation – specify

Organisation legal name

Organisation trading name

Contact details

Title

Given name

Family name

Job title

Unit number

Street number

Street name / PO Box

Street type (eg Street, Road, Drive)

Suburb

State

Postcode

Phone

Mobile

Email (if provided, correspondence will be emailed)

C. Other parties

Guardian of the apprentice / trainee (if applicable)

Other party is the:

- Guardian of the apprentice / trainee

Relationship to apprentice / trainee

Contact details

Title

Given name

Family name

Job title

Unit number

Street number

Street name / PO Box

Street type (eg Street, Road, Drive)

Suburb

State

Postcode

Phone

Mobile

Email (if provided, correspondence will be emailed)

Other party

Include details of the Training Advocate here if they will attend the Tribunal with you to provide support and assistance.

Other party is an:

Individual

Organisation – specify

Organisation legal name

Organisation trading name

Contact details

Title

Given name

Family name

Job title

Unit number

Street number

Street name / PO Box

Street type (eg Street, Road, Drive)

Suburb

State

Postcode

Phone

Mobile

Email (if provided, correspondence will be emailed)

If there are more parties to this application than this form provides for, please also complete an 'A10 - Details of Additional Party' (available from www.saet.sa.gov.au) form for all other parties and submit with your application.

Training and Skills Commission

Note: The Training and Skills Commission are notified of every dispute and have the option to participate in proceedings.