

APPLICATION FOR EXTERNAL REVIEW (PUBLIC SECTOR)

Public Sector Act 2009



SOUTH
AUSTRALIAN
**EMPLOYMENT
TRIBUNAL**

Case number (SAET use only)

About this form

- This is the approved form to apply for SAET to undertake an external review of decisions in accordance with the *Public Sector Act 2009*.
- This application should be supported with a copy of the decision(s) you are applying to have reviewed.
- This form may be completed electronically and lodged as an email attachment (not a scan). A signature is not required.

1 TYPE OF APPLICATION

Note that certain decisions, as defined in section 59(2) of the *Public Sector Act 2009* and regulation 25 of the *Public Sector Regulations 2010*, are excluded from a right to review.

This application relates to a:

- Reviewable decision (sections 61 and 62(1) of the *Public Sector Act 2009 SA*) (PS-01) in regards to:
- a merit based selection process decision (section 63) (PS-01-03)
 - a reclassification decision (section 49) (PS-01-02)
 - any other employment decision directly affecting the employee (section 62(1)) (PS-01-01)
- Prescribed reviewable decision (section 62(8) of the *Public Sector Act 2009 SA*) (PS-02) in regards to:
- a decision to take disciplinary action (section 62(8)(a)) (PS-02-01)
 - any decision to reduce an employee's remuneration level (section 62(8)(b)) (PS-02-02)
 - a decision to transfer an employee, or to assign an employee to different duties or a different place, made in conjunction with a decision to take disciplinary action or reduce an employee's remuneration level (section 62(8)(c)) (PS-02-03)
 - a decision to transfer an employee, or to assign an employee to a different place, that reasonably requires the employee to change his or her place of residence (section 62(8)(d)) (PS-02-04)

2 OTHER PROCEEDINGS BEFORE SAET

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

- No Yes – provide (one of) the SAET Case number(s)

3 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 (employee)	
Representative (if applicable)	

Respondent (agency)

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.

4 ELIGIBILITY

Are you employed pursuant to Part 7 of the *Public Sector Act 2009*? If unsure, consult your agency's Human Resources area.

- Yes (only individuals employed under Part 7 of the Act are eligible to apply)

5 DECISION DETAILS

Initial decision

Date you received the initial decision

Is a copy of the initial decision attached to this application

Yes No

Internal review decision

Was an internal review completed?

Yes - specify

Date you received the internal review decision

Is a copy of the internal review decision attached to this application

Yes No

No – indicate the reasons why

- Not required for selection process related decision
- The application was made after the period allowed for such an application and the agency unreasonably refused to allow an extension of time within which to make the application
- The agency unreasonably extended the time within which the internal review should be completed

This form must be lodged within 21 days, or within 7 days if the decision relates to 'selection' or a 'refusal to extend time for an internal review', of receiving the internal review decision. Are you lodging this application within the prescribed timeframe?

Yes – Go to next section

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

6 SELECTION PROCESS RELATED DECISIONS

If your application does not relate to a decision related to a [merit based selection process](#), please go to section 7.

Details of the vacancy

Title of the vacant role

Grievance

The selection process conducted on a basis of merit but:

- the employee was not eligible for appointment; or
- the processes were affected by nepotism or patronage or were otherwise not properly based on assessment of the respective merits of the applicants; or
- there was some other serious irregularity in the processes.

Provide further details of your grievance in Section 7.

7 GRIEVANCE AND PROPOSED REMEDY

Particulars of grievance

- Outline either:
- why you consider the decision harsh, unjust or unreasonable; or
 - if the basis for your grievance related to a merit based selection process, further detail of the grievance identified within Part 6

Proposed remedy

I apply for SAET to:

- remit the decision to the agency for reconsideration - Outline recommendations sought below.

Note that SAET can only order the agency to alter its decision in relation to prescribed decisions (section 62(8)).

- for merit based selection process related decisions only, recommence the selection process from the beginning or some later stage - Outline the point when you suggest the process should be recommenced from below.
- for prescribed decisions only, substitute the decision - Outline your proposed substituted decision below.

8 SUPPORTING ATTACHMENTS

Provide a brief description of any attachments supporting this application.

9 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 (employee)

Contact details

Title	Given name	Other given names	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Job title	Date of birth		
<input type="text"/>	<input type="text"/>		
Unit number	Street number	Street name / PO Box	Street type (eg Street, Road, Drive)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone	Mobile	Email (if provided, correspondence will be emailed)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Do you require an interpreter?		Do you have any other special requirements?	
<input type="checkbox"/> No <input type="checkbox"/> Yes – specify language / dialect		<input type="checkbox"/> No <input type="checkbox"/> Yes – specify requirements	
<input type="text"/>		<input type="text"/>	

Applicant representative details

Are you (the applicant) represented? Note that, in accordance with section 62(5) of the Act, a party may not be legally represented unless approved by SAET.

Yes No – go to **B. Respondent**

Type of representative

Union Advocate

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	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Unit number	Street number	Street name / PO Box	Street type (eg Street, Road, Drive)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone	Mobile	Email (if provided, correspondence will be emailed)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

B. Respondent (agency)

Agency name

Contact details of the agency's Chief Executive (or equivalent agency head)

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)