

APPLICATION FOR ENTERPRISE AGREEMENT

Section 77(2) Fair Work Act 1994 SA (FW-11)



SOUTH
AUSTRALIAN
EMPLOYMENT
TRIBUNAL

Case number (SAET use only)

About this form

- This is the approved form to apply for SAET to approve an enterprise agreement under the section 77(2) of the *Fair Work Act 1994 SA*.
- This application should be lodged with the enterprise agreement signed by the relevant parties (and any other supporting documentation), together with a Word version of the agreement, within 21 days of the agreement being signed.
- This form may be completed electronically and lodged as an email attachment (not a scan). A signature is not required on the form.

1 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)

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	Contact's last name
Employer	
Representative (if applicable)	
Employee Rep #1	
Employee Rep #2 (if applicable)	
Employee Rep #3 (if applicable)	
Employee Association #1 (if applicable)	
Employee Association #2 (if applicable)	

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 TITLE OF PROPOSED AGREEMENT

Name of the proposed agreement.

4 ENTERPRISES TO BE COVERED BY THE AGREEMENT

Provide details of the enterprises covered by the proposed agreement. Complete as many as necessary.

Name of business	Location(s) where business is carried out
<input type="text"/>	<input type="text"/>
Name of business	Location(s) where business is carried out
<input type="text"/>	<input type="text"/>

5 OVERVIEW EMPLOYEE PARTIES TO THE AGREEMENT

Describe the occupational groups and/or sections of the employees covered by the agreement

State the number of employees covered by the agreement at the time of signing

Total	<input type="text"/>	Of which:	Are male	<input type="text"/>
			Are female	<input type="text"/>
			Have first language other than English	<input type="text"/>

Do any other employees suffer from an intellectual disability that prevented them from having a proper understanding of the negotiations?

- Yes – If 'Yes', specify the measures to provide representation for such employees

- No

Contact details of employee representatives involved in the negotiations are to be completed in Attachment 1.

6 INVOLVEMENT OF REGISTERED EMPLOYEE ASSOCIATIONS

Were any of the employees represented by a Registered Employee Association during the course of negotiations?

- Yes – If 'Yes', specify the name of the Registered Association

- No – go to the next section

Is this agreement formally entered into on behalf of employees by an association?

- Yes – If 'Yes', the Register Association is entering into the agreement pursuant to section:
- 75(2)(a) – on behalf of member(s); or
 - 75(2)(b) – on behalf of a group of employees (whether members or not)

- No

How was authority conferred on the Registered Association by the majority of the employees constituting the group? Select as many as apply. Note that evidence may be required in accordance with section 79(1)(c).

- Membership
- Written authority
- Other - If 'Other', specify how

Contact details of the Registered Employee Association involved in the negotiations are to be completed in Attachment 1.

7 EMPLOYEE APPROVAL OF THE AGREEMENT

How were employees informed of the contents of the Agreement, the terms of any Award or existing Enterprise Agreement modified by the Agreement, and the intention to apply for approval?

How did employees approve the agreement (Ballot and/or Other means)?

Ballot If 'Ballot', did a majority of the employees approved the Agreement?

Yes No

Specify number of valid votes: For Against

What measures taken to ensure all employees had a reasonable opportunity to participate in the ballot?

Other means (eg general meetings, individual endorsements)

If 'Other means' specify percentage (%) supporting approvals:

What method was adopted?

Are there any employees covered by the Agreement who have not signed the Agreement and are not represented by a Registered Association or agent?

Yes - If 'Yes', please describe

No

8 EMPLOYER COMPLIANCE WITH SECTION 76 OF THE ACT

Section 76 (1): Did the employer give employees to be bound by the Agreement 14 days notice of intention to begin negotiations for an Enterprise Agreement? Note that s76(1) provides that this notice is not required if the Agreement is negotiated to settle an industrial dispute or SAET grants an exemption from this requirement.

Yes - If 'Yes' state briefly how this notice was provided

No - If 'No' state grounds for seeking an exemption

Section 76 (2): Did the employer inform employees of their right to appoint a representative (including an agent of the employee's choice or a Registered Association of employees) in the negotiation, and proceedings for approval before beginning the negotiations?

Yes - If 'Yes' state briefly how this information was given

No

Section 76 (3): If the employer was aware that an employee was a member of a Registered Association, did they take reasonable steps to notify the association of the intended negotiations before beginning the negotiations?

Yes - If 'Yes' state briefly how this notification was given

No

Not applicable

Section 76 (4): Did the employer ensure that employees to be covered by the Award, who are subject to an Award, have reasonable access to the Award?

Yes - If 'Yes' state briefly how this action was achieved

No

Not applicable

9 ABOUT THE AGREEMENT

Does the Agreement contain any conditions of employment including remuneration that are **inferior** to the minimum standards set out in the Act or established by SAET? (Note: The Act sets out minimum standards relating to remuneration, sick leave, carers leave, annual leave, bereavement leave and parental leave and gives SAET power to vary those standards.)

Yes - The application can only be approved in the circumstances outlined in Section 79(5)

No

Is the Agreement package **inferior** to the package of remuneration and conditions in any applicable Award?

Yes - The application can only be approved in the circumstances outlined in Section 79(5)

No

What is the term of the Agreement? (Note: Section 83(1) of the Act sets a three-year maximum on the term of the agreement.)

Nominated end date and/or Number of years

Does the Agreement vary or replace an earlier Enterprise Agreement?

Yes - specify Agreement Case number Expiry date

No

What Awards, or Certified Agreements (including those made pursuant to the *Fair Work Act 2009*) currently apply to the work covered by the proposed Agreement? (Set out names of awards or agreements in full)

Which clause(s) of the Agreement:

- Makes provision for the renegotiation of the Agreement at the end of its term?
- Identifies the business(s) for which it is made?
- Identifies the group of employees to which it relates?
- Sets out procedures for the prevention and settlement of industrial disputes?

Does the Agreement provide that sick leave is available to an employee if the leave becomes necessary because of the sickness of a family member? (Note under Section 77(1)(e) of the Act an Enterprise Agreement must provide that such leave is available or specifically excludes the provision of sick leave to such circumstances)

- Yes - specify Clause number(s)
- No

Does the Agreement provide for consultation between the employer and the employees bound by the Agreement about changes to the organisation and performance of work? (Note under Section 79(1)(d) of the Act an Enterprise Agreement must make provision for such consultation unless the parties agree that such a provision is not appropriate.)

- Yes - specify Clause number(s)
- No

Is an order being sought by any party to the Agreement for the suppression of public disclosure of the Agreement or part of the Agreement? (Note: Section 80(4))

- Yes - specify Clause number(s)
- No

Is it intended that the Agreement will cover aspects of the employment of the persons working under it to the exclusion of provisions of any existing Awards or Agreements? (Note under Section 81(3) of the Act an Enterprise Agreement will operate to the exclusion of an Award only to the extent of inconsistency with the Award)

- Yes - specify Clause number(s)
- No

10 INFORMATION TO ASSIST THE POTENTIAL HEARING

Pursuant to Section 79(11) of the Act, SAET may approve an Enterprise Agreement without proceeding to a formal hearing based upon the information in this form. If a hearing is required, please specify any considerations that would assist SAET to list the matter at a convenient time and location (such as preferred days or time etc.)?

11 SUPPORTING ATTACHMENTS

Provide a brief description of any attachments supporting this application. The attachments must include a copy of the enterprise agreement signed by the relevant parties plus a Word version of the agreement.

12 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. Employer party to the agreement

Organisation legal name

Organisation trading name

Contact details

Title	Given name	Other given names	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Job title

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?

- No Yes – specify language / dialect

Do you have any other special requirements?

- No Yes – specify requirements

Employer's representative details

Is the Employer represented?

- Yes No – go to *B Employee representative details*

Type of representative

- Legal Employer association 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. Employee representatives (other than Registered Association)

Complete as many that apply. If there are more contacts than this form provides for, please also complete an 'A10 - Details of Additional Party' (available from www.saet.sa.gov.au).

Employee representative contact #1

Title	Given name	Other given names	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Job title			
<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"/>	

Employee representative contact #2

Title	Given name	Other given names	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Job title			
<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"/>	

Employee representative contact #3

Title	Given name	Other given names	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Job title			
<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"/>	

C. Registered Association (if applicable)

Complete as many that apply. If there are more contacts than this form provides for, please also complete an 'A10 - Details of Additional Party' (available from www.saet.sa.gov.au).

Registered Association #1

Association name

Contact details

Title	Given name	Other given names	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Job title

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"/>

Registered Association #2

Association name

Contact details

Title	Given name	Other given names	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Job title

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"/>