

Form LC 12

REPUBLIC OF NAMIBIA

LABOUR ACT, 2007
(Section 64(6)(b)) (Rule 14(1)(a))

REFERRAL OF DISPUTE CONCERNING RECOGNITION
TO LABOUR COMMISSIONER

Instruction: Attach hereto copies of the Trade Union's Request for Recognition and the Employer's Rejection, if any.

1. Full name of Trade Union: _____
2. Physical Address: _____
3. Phone: _____ Fax: _____ E-mail: _____
4. Postal Address: _____
5. Full name of Employer / Employers' Organization: _____

6. Physical Address: _____
7. Postal Address: _____
8. Phone: _____ Fax: _____ E-mail: _____
9. Date on which Trade Union requested recognition: _____ 20 ____.
10. Date on which employer rejected recognition (if applicable): _____ 20 ____.
11. The Employer has not replied to complainant within 30 days of its receipt of complainant's request for recognition. (Check if applicable): _____
12. Description of Dispute: _____

I certify that the above particulars are true and correct.

Representative of Trade Union (print name and sign)

Position

Date: _____

To: Labour Commissioner
249-582 Richardine Kloppers Street - Khomasdal
Private Bag 13367
WINDHOEK

Copy to: (other party or parties to the dispute)