

Labour Management Arbitration Committee

APPLICATION FOR APPOINTMENT

TO THE ARBITRATION ROSTER

FOR NEWFOUNDLAND AND LABRADOR

Information provided is for the use of the Labour Management Arbitration Committee to determine the suitability of arbitrators for appointment to the Arbitration Roster and to receive arbitration appointments.

Persons completing this form applying for appointment to the Arbitration Roster are indicating their willingness to accept appointments pursuant to the *Labour Relations Act* and *Public Service Collective Bargaining Act*.

Contact and background information of persons placed on the Arbitration Roster may be shared with parties at their request.

Please return completed form to:

Labour Management Arbitration Committee
c/o Labour Relations Agency
P.O. Box 8700
St. John's, NL A1B 4J6

Name of Applicant:

Company:

Primary Occupation:

Street Address:

City:

Province:

Postal Code:

Telephone (Bus):

Home

Fax Number:

Mobile:

Email:

Education

Education 1

Degree/Certificate:

Year Obtained:

Institution:

Location (City/Prov):

Education 2

Degree/Certificate:

Year Obtained:

Institution:

Location (City/Prov):

Education 3

Degree/Certificate:

Year Obtained:

Institution:

Location (City/Prov):

Education 4

Degree/Certificate:

Year Obtained:

Institution:

Location (City/Prov):

(A copy of your resume must also accompany this application)

4. What is your practical experience in presenting or adjudicating cases at grievance and arbitration under collective agreements, labour relations boards, labour standards, the workers' compensation appeal tribunal, and/or human rights?

5. Please indicate the approximate number of labour arbitration awards you have issued in the following jurisdictions in the past five years.

Newfoundland and
Labrador

Federal (Including
Territories)

Other Provinces

6. Please indicate the sectors in which you have labour arbitration experience.

Public Sector	No. of Awards Issued
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Private Sector	No. of Awards Issued
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Construction	No. of Awards Issued
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7. Please indicate any interest arbitration cases you have decided in the past 5 years.

8. Please provide any information you feel demonstrates you satisfy the criteria of acceptability, personal suitability or the skills needed to be a labour arbitrator.

9. Please provide any other information regarding your labour arbitration experience that you feel is relevant.

Please note, Labour Management Arbitration Committee and the Minister of Labour will rely on this information as accurate until receiving written notification advising otherwise.

REFERENCES

Please include the name of the four reference being submitted in support of this application, two each from union and management (or their representatives) which address the LMAC Selection Criteria. Provide addresses and telephone numbers of each reference.

DECLARATION

By signing this application, I declare that I have not acted as a representative of either a union or employer in labour relations matters within the past twelve (12) months.

Signed:

Dated:

Please ensure that your resume is submitted along with this application