

Labour Board

Appeal Form (under the *Labour Standards Code*)

Complete and return within 10 business days of receipt of a Labour Standards decision

Section A: Employee Information

Full Name			
Address		Town/City	Postal Code
Home Telephone No.	Other Telephone No.	Fax No. (if available)	E-mail

Section B: Employer or Recruiter Information

Business Name/Employer's Name/Recruiter Name		Contact Name (<i>if applicable</i>)/Position	
Address		Town/City	Postal Code
Home Telephone No.	Other Telephone No.	Fax No. (if available)	E-mail

I am the employee employer recruiter

Section C: Type of Appeal

I am appealing: (Check the appropriate box)

- An Order of the Director of Labour Standards, ordering monies paid
Include the following with your appeal:
 - You **must** include a certified cheque, money order or bank draft payable to the Labour Board in the amount of the Director's Order or \$2,000, whichever is less **[OR]** A bond in the amount of the Director's Order
 - A copy of the Director's Order
 - Any other documents relating to your appeal

- An Order of the Director of Labour Standards, where there is no order for monies to be paid
Include the following with your appeal:
 - A copy of the Director's Order
 - Any other documents relating to your appeal

- An Order of the Director of Labour Standards, dismissing my complaint
Include the following with your appeal:
 - A copy of the Director's Order
 - Any other documents relating to your complaint

- A decision from the Labour Standards Division, not to proceed with my complaint
 - Include a copy of the Director's Order with your complaint

- One month has elapsed since I made my initial complaint and no decision has been made.

Section D: Additional Information relating to your appeal

Nature of Complaint:		
<input type="checkbox"/> Vacation Pay	<input type="checkbox"/> Protection of Pay	<input type="checkbox"/> Compassionate Care Leave
<input type="checkbox"/> Pregnancy/Parental Leave	<input type="checkbox"/> Holidays with Pay	<input type="checkbox"/> Minimum Wage
<input type="checkbox"/> Termination of Employment	<input type="checkbox"/> Bereavement and Court Leave	<input type="checkbox"/> Recruitment Fees
<input type="checkbox"/> Other _____		
Date of alleged violation of the <i>Labour Standards Code</i>	_____ / _____ / _____	
	dd mm yy	
Date the complaint was filed with the Labour Standards Division	_____ / _____ / _____	
	dd mm yy	
Date you received Director's Order or decision of the Labour Standards Division	_____ / _____ / _____	
	dd mm yy	
Describe your reasons for appealing (<i>Use additional pages if necessary</i>)		
Payment/Security: If you are appealing a Director's Order requiring you to make payment, you must attach a certified cheque, money order or bank draft payable to the Labour Board for the full amount of the Order or \$2000, whichever is less, or security in the form of a bond in the full amount of the Order payable to the Board. The requirement to provide payment or security is set out in Section 84(1) of the <i>Labour Standards Code</i> . The FULL amount of the payment or security MUST accompany your application in order for the appeal to be processed by the Board. AN APPLICATION WHICH IS NOT ACCOMPANIED BY THE FULL AMOUNT OF THE REQUIRED FUNDS OR SECURITY MAY BE DISMISSED BY THE BOARD WITHOUT A HEARING INTO THE MERITS OF THE CASE, AND WITHOUT FURTHER NOTICE TO YOU.		
Upon receipt, the payment or security will be held in trust pending a decision on your appeal.		
I certify that all information provided is true and correct to the best of my knowledge.		
_____, of _____,		
signature	city/town	
_____ this _____ day of _____, 20 _____.		
province	day	month

Submit to:
 Labour Board
 1601 Lower Water Street, 3rd Floor
 PO Box 202
 Halifax, NS B3J 2M4

The Board will accept an appeal by fax or by email, only where there is no requirement to include a security payment

Fax: 902-424-1744
 Email : labourboard@novascotia.ca

For More Information call 902-424-6730 or
 Toll-free 1-877-424-6730