



Saskatchewan

Labour Relations Board

www.sasklabourrelationsboard.com

FORM 20
[Section 22]

PROVISIONAL EMPLOYEE DETERMINATION

APPLICATION FOR ORDER PURSUANT TO CLAUSE 6-104(2)(i) AND SECTION 6-105
OF THE SASKATCHEWAN EMPLOYMENT ACT

1. _____
name of applicant

of _____
no. street city/town province postal code

_____ *telephone* _____ *alternate phone number* _____ *email address*

applies to the Labour Relations Board for a provisional Order determining the appropriate bargaining unit for the position of _____.

2. The name and address of the respondent concerned, and, if the respondent is an employer, the general nature of its business, are as follows:

Name: _____ Nature of Business: _____

Address: _____
no. street city/town province postal code

_____ *telephone* _____ *alternate phone number* _____ *email address*

3. The applicant alleges that the position of _____ should properly be:

within the scope of _____ in LRB File No. _____ ; or
(union)

excluded from the bargaining unit;

by reason of the following facts:

(If necessary, provide additional details as an attachment.)

4. The names of all unions that represent employees of the employer in the workplace of the disputed position are as follows:

I, the undersigned, swear (or affirm) that the submissions set forth above are, in so far as they are matters of fact, true and complete to the best of my knowledge and, in so far as they are matters of opinion, are reasonably and honestly believed by me.

SWORN (OR AFFIRMED) BEFORE ME
at _____, Saskatchewan,
this _____ day of _____,
20____.

Notary Public or Commissioner for Oaths for Saskatchewan
My Commission Expires: _____

} _____
signature

CONTACT INFORMATION AND ADDRESS FOR SERVICE

If the applicant is not an individual, indicate the name, address and contact information of the individual swearing or affirming the document.

Name: _____

Position Held: _____

Address: _____
no. street city/town province postal code

Telephone: _____

Email address: _____

If the applicant is represented by legal counsel, also indicate the name and address for service of the applicant's lawyer.

Lawyer: _____

Address: _____
no. street city/town province postal code

Telephone: _____

Email address: _____