Response form

Case number

You must complete all questions marked with an '*'

1	Claimant's name	
1.1	Claimant's name	
2	Respondent's details	
2.1	Title, if applicable.	Mr Mrs Miss Other
2.2*	Name of individual, company or organisation	
2.3	Enter the company number, if applicable.	
2.4	What type of employer is the respondent?	
2.5	Name of contact	
2.6*	Address	
	Postcode	
	DX number (If known)	
2.7	Phone number Where we can contact you during the day	
	Mobile number (If different)	
2.8	How would you prefer us to contact you? (Please tick only one box)	Email Post Whatever your preference please note that some documents cannot be sent electronically
2.9	Email address	

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2.10	Which types of hearing can you attend Further details on video hearings can be found on the following link https://www.gov. uk/guidance/hmcts-telephone-and-video- hearings-during-coronavirus-outbreak	☐ I can take part in video hearings ☐ I can take part in phone hearings
2.11	How many people does this organisation employ in Great Britain?	
2.12	Does this organisation have more than one site in Great Britain?	Yes No
2.13	If Yes, how many people are employed at the place where the claimant worked?	
3	Acas Early Conciliation details	
3.1	Do you agree with the details given by the claimant about early conciliation with Acas	Yes No
	If No, please explain why, for example, has the claimant given the correct Acas early conciliation certificate number or do you disagree that the claimant is exempt from early conciliation, if so why?	

4	Employment details
4.1	Are the dates of employment given by the claimant correct?
	If Yes, please go to question 4.2
	If No, please give the dates and say why you disagree with the dates given by the claimant
	When their employment started / / /
	When their employment ended or will end / /
	Do you want to provide any further information about the claimant's employment dates?
4.2	Is their employment continuing?
4.3	Is the claimant's description of their job or job title correct?
	If Yes, please go to Section 5
	If No, please give the details you believe to be correct

5	Earnings and benefits						
5.1	Are the claimant's hours of work correct?	Yes	☐ No	■ Not applicable			
	If No, please enter the details you believe to be correct.			hours each week			
5.2	Are the earnings details given by the claimant correct?	Yes	No	Not applicable			
	If Yes, please go to question 5.3						
	If No, please give the details you believe to be correct below Pay before tax (Incl. overtime, commission, bonuses etc.)	£			Weekly	Monthly	Annually
	Normal take-home pay (Incl. overtime, commission, bonuses etc.)	£			Weekly	Monthly	Annually
5.3	Is the information given by the claimant correct about being paid for, or working a period of notice?	Yes	☐ No	☐ Not applicable			
	If Yes, please go to question 5.4						
	If No, please give the details you believe to be correct below. If you gave them no notice or didn't pay them instead of letting them work their notice, please explain what happened and why.						
5.4	Are the details about pension and other benefits e.g. company car, medical insurance, etc. given by the claimant correct?	Yes	□ No	Not applicable			
	If Yes, please go to Section 6						
	If No, please give the details you believe to be correct.						

6	Response
6.1*	Do you contest all or part of the claim? Yes No
	If No, please go to Section 7
	If Yes, please set out the facts which you rely on to contest the claim. (See Guidance - If needed, please use the blank sheet at the end of this form.)

the claimant's daim, please tick this box and complete question 7.3 Please set out the background and details of your claim below, which should include all important dates see Guidance for more information on what details should be included)	If you v	vish to make ar imant's claim r	n Employer's Co	ontract Claim	in response	to on 7 3					
The Automotive to Have information on with Octobra Solution of introducty)	Please	set out the bac	kground and c	letails of your	claim below	v, which shou	ıld include al	important d	lates		
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Employer's Contract Claim

8	Your representative	
	If someone has agreed to represent you, plea	se fill in the following. We will in future only contact your representative and not you.
8.1	Name of representative	
8.2	Name of organisation	
8.3	Address	
	Postcode	
8.4	DX number (If known)	
8.5	Phone number	
8.6	Mobile phone	
8.7	Their reference for correspondence	
8.8	How would you prefer us to communicate with them? (Please tick only one box)	☐ Email ☐ Post
8.9	Email address	
8.10		I can take part in video hearings
	Further details on video hearings can be	☐ I can take part in phone hearings
	found on the following link https://www.gov. uk/guidance/hmcts-telephone-and-video-	
	hearings-during-coronavirus-outbreak	
9	Disability	
9.1	In the respondent party - are you aware of	
	any physical, mental or learning disability or health conditions which r equires support?	Yes No I'm not sure yet
	If Yes, tell us what this disability or	
	condition is and what support that	
	anyone in the respondent party, including	
	representative and witnesses would need	
	as the claim progresses through the system. Consider any hearings that may take place	
	at tribunal buildings.	
	We know people with disabilities sometimes	need support to access information and use our services. We call this a reasonable adjustment. Some

• documents in alternative formats, colours and fonts

Reasonable adjustments can include:

• help with communicating, sight, hearing, speaking and interpretation

reasonable adjustments need to be agreed by a judge, and you can discuss with the tribunal if your needs change.

access and mobility support if a hearing takes place in person

Continuation sheet

General Data Protection Regulations

The Ministry of Justice and HM Courts and Tribunals Service processes personal information about you in the context of tribunal proceedings.

For details of the standards we follow when processing your data, please visit the following address https://www.gov.uk/government/organisations/hm-courts-and-tribunals-service/about/personal-information-charter.

To receive a paper copy of this privacy notice, please call our Customer Contact Centre - see details below

Please note: a copy of the claim form or response and other tribunal related correspondence may be copied to the other party and Acas for the purpose of tribunal proceedings or to reach settlement of the claim.

Customer Contact Centre

England and Wales: 0300 323 0196 Welsh speakers only: 0300 303 5176

Scotland: 0300 790 6234

(Mon - Fri, 9am -5pm), they can also provide general procedural information about the Employment Tribunals.