



FOR OFFICE USE ONLY

DATE STAMP

## COMPLAINT FORM - UNJUST DISMISSAL

### Canada Labour Code, Part III (Labour Standards) - DIVISION XIV

#### BEFORE FILING A COMPLAINT

- An Unjust Dismissal complaint is admissible if you:
  - have worked **12 consecutive months or more** for the named employer
  - are **not** covered by a collective agreement, and
  - file the complaint within **90 days** of the date of dismissal
- Before completing this form, please review the [Filing a Complaint](#) web page and consult the list of [federally regulated](#) industries.
- For more information on [federal labour standards](#), please visit: <https://www.canada.ca/en/services/jobs/workplace/federal-labour-standards.html> or call toll free 1-800-641-4049, Teletypewriter (TTY) users 1-800-926-9105.
- Send the completed form to the nearest [Labour Program Office](#).

#### SECTION A - YOUR PERSONAL AND WORK INFORMATION

Last/Family Name		First/Given Name		Middle Initial
Mailing Address (number, street, apartment, PO box, rural route)				
City/Town		Prov./Territory	Postal Code	Telephone
Telephone (alternate)	Job Title		Temporary Foreign Worker? <input type="radio"/> Yes <input type="radio"/> No	
First day of work (YYYY-MM-DD)	Date of dismissal (YYYY-MM-DD)		<input type="checkbox"/> Still Employed	
Did you provide the employer with documents stating that an internship fulfils the requirements of an educational program?			<input type="radio"/> Yes <input type="radio"/> No (Go to section B)	
Start date of internship (YYYY-MM-DD):		End date of internship (YYYY-MM-DD):		
Attach student internship schedule (if applicable)				

#### SECTION B - EMPLOYER INFORMATION

Full legal name of employer, company or business		Industry or business type
Is this business operating under another name? <input type="radio"/> Yes (provide the name) <input type="radio"/> No		
Your workplace address (number, street, apartment, PO box, rural route)		
City/Town		Prov./Territory
Employer's contact person		Title
Employer's business or mailing address (if different from above) (number, street, apartment, PO box, rural route, city/town, province/territory, postal code)		Postal Code
Is employer still in business? <input type="radio"/> Yes (Go to section C) <input type="radio"/> No (Complete below)		
If no, specify <input type="radio"/> Bankruptcy <input type="radio"/> Closed its doors <input type="radio"/> Other		
Date (YYYY-MM-DD): _____		
If other, specify: _____		

**SECTION C - UNJUST DISMISSAL COMPLAINT ALLEGATIONS****I was dismissed by my employer and I believe that the dismissal was unjust (Complete below)**

Did you work for <b>12 or more consecutive months</b> for the named employer?	<input type="radio"/> Yes (Complete below)	<input type="radio"/> No (Go to section D)
Did the employer give you the reasons for your dismissal in writing? If yes, please enclose a copy of this letter.	<input type="radio"/> Yes	<input type="radio"/> No

**SECTION D - MEMBER OF A GROUP OF EMPLOYEES SUBJECT TO A COLLECTIVE AGREEMENT**

Were you covered by a collective agreement when you were dismissed?	<input type="radio"/> Yes (Complete below)	<input type="radio"/> No (Go to section E)
Provide full union's name and local		
Did you file a grievance related to the same event(s)?	<input type="radio"/> Yes	<input type="radio"/> No
Name of union representative	Telephone	

**SECTION E - REPRESENTATION BY A LEGAL COUNSEL OR ANOTHER INDIVIDUAL (e.g. spouse, common-law partner, other family member or friend)**

Are you represented by a legal counsel or another individual?	<input type="radio"/> Yes (Complete Part A or Part B)	<input type="radio"/> No (Go to section F)
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**Part A – Representation by a legal counsel**

Full legal counsel's name
Name of the Law Firm (if applicable)
Complete Address (number, street, apartment, PO box, rural route) and telephone

**Part B – Representation by another individual (who is not a legal counsel) e.g. spouse, common-law partner, other family member or friend.**

Authorized person's Last/Family name	Authorized person's First/Given name		
Address (number, street, apartment, PO box, rural route)			
City/Town	Prov./Territory	Postal Code	Telephone

**SECTION F - ELIGIBILITY FOR AN EXTENSION OF TIME TO FILE A COMPLAINT (Please complete this section only if you are outside the 90 day after the date of dismissal deadline to submit your complaint.)**

You may be eligible for an extension of time to file a complaint if you:

- filed a complaint with another government official
- filed a complaint under the wrong complaint category, or
- filed a previous complaint that was incomplete or that contained an error

If one of more of these criteria apply to you, complete the relevant section(s) below (section i, ii, and iii). If they do not apply to you, go to section G)

**i) COMPLAINT FILED WITH ANOTHER GOVERNMENT OFFICIAL**

Another government agency may include: a Provincial or Territorial government, a Human Rights Commission, a Workers Compensation Board or a federal official that you believe had the authority to deal with the complaint.

**If you filed an Unjust Dismissal complaint with another government official that had no authority to deal with the complaint, an extension of time to file such complaint with the federal Labour Program may be allowed if you:**

- worked **12 consecutive months or more** for the named employer
- were **not** covered by a collective agreement, and
- filed the original complaint within **90 days** of the date of dismissal

## SECTION F - ELIGIBILITY FOR AN EXTENSION OF TIME TO FILE A COMPLAINT (Please complete this section only if you are outside the 90 day after the date of dismissal deadline to submit your complaint.) (cont'd)

Did you file an Unjust Dismissal complaint with another government official? ☐ Yes (Complete below) ☐ No (Go to section ii)

If yes, with which government official?

If yes, was the Unjust Dismissal complaint filed with the other government official within **90 days** of the date of dismissal? ☐ Yes (Complete below) ☐ No (Go to section ii)

If yes, date you filed your complaint with the other government official (YYYY-MM-DD) \_\_\_\_\_

### ii) COMPLAINT FILED UNDER WRONG COMPLAINT CATEGORY

The 90-day deadline for filing your Unjust Dismissal complaint may be extended if you previously filed either a Genetic Testing or a Reprisal complaint within the 90-day statutory time limit and that complaint was withdrawn. Note: reprisal complaints are filed with the [Canada Industrial Relations Board](#).

For more information on filing an Unjust Dismissal complaint, visit the [Filing a complaint web page](#).

Did you previously file a Genetic Testing or a Reprisal complaint that was withdrawn? ☐ Yes (Complete below) ☐ No (Go to section iii)

If yes, was the previous complaint filed during the required time-period? ☐ Yes (Complete below) ☐ No (Go to section iii)

If yes, provide the date on which your previous complaint was filed. (YYYY-MM-DD) \_\_\_\_\_

### iii) FILED A PREVIOUS COMPLAINT THAT WAS INCOMPLETE OR THAT CONTAINED AN ERROR

The 90-day deadline for filing an Unjust Dismissal complaint may be extended if you filed a previous complaint within the 90-day statutory time limit and that complaint was withdrawn because it was incomplete or contained an error. For more information on filing Unjust Dismissal complaints, visit the [Filing a complaint web page](#).

Was your previous Unjust Dismissal complaint incomplete or did it contain an error? ☐ Yes (Complete below) ☐ No (Go to section G)

If yes, was the Unjust Dismissal complaint filed with the Labour Program during the required time-period? ☐ Yes (Complete below) ☐ No (Go to section G)

If yes, provide the date you filed the complaint with the Labour Program (YYYY-MM-DD) \_\_\_\_\_

## SECTION G - RESTRICTION ON FILING MULTIPLE COMPLAINTS FOR SUBSTANTIALLY THE SAME FACTS (Subsection 240(1.1) of the Canada Labour Code (Code))

**This complaint** cannot be filed if a Reprisal complaint (246.1(1) of the Code) or a Genetic Testing complaint (247.99(1) of the Code) has already been filed, that is based on substantially the same facts, unless that complaint has been withdrawn.

A Monetary and/or Non-monetary complaint may be filed if it relates only to the payment of your wages or other amounts to which you are entitled, including amounts further to a group termination, an individual termination or severance pay. The Monetary and/or Non-monetary complaint will be **suspended** until the day on which the Genetic Testing complaint, Reprisal complaint or Unjust Dismissal complaint, as the case may be, is withdrawn or resolved.

## SECTION H - PRIVACY NOTICE

Your personal information is being collected to handle your unjust dismissal complaint and is collected under the authority of the *Canada Labour Code*. The collection of this information is voluntary and a refusal to provide the information may result in delays in handling your complaint.

A copy of your complaint form and supporting documentation will be provided to the employer named in your complaint and/or his or her representative. Please ensure that you only provide information required for the resolution of this complaint and do not provide the personal information of third parties, such as witnesses.

Your information will be protected in accordance with the [Privacy Act](#). You have the right to the protection of, and access to, your personal information, which is described in Personal Information Bank ESDC PPU 006. More details about the departmental handling of your personal information can be found at [Infosource](#) ([www.infosource.gc.ca](http://www.infosource.gc.ca)). You have a right to access your personal information and, where required, to correct inaccurate personal information. In addition, if you feel that your personal information is being handled inappropriately, you have the right to file a complaint to the Office of the Privacy Commissioner by calling their information centre at 1-800-282-1376 or by visiting their [contact pages](#) (<https://www.priv.gc.ca/en/>).

The information you provide may be used and/or disclosed for policy analysis, research and/or evaluation purposes. These additional uses and/or disclosures of your personal information will never result in an administrative decision being made about you. If your complaint results in a decision from the Canada Industrial Relations Board (CIRB), this decision and your identity may be made available to the public. For more information about the CIRB process, visit their website.

**SECTION I - SIGNATURE OF THE COMPLAINT FORM (Signatures are required)****BY THE EMPLOYEE**

I (Complainant) certify that the information given on this form is, to the best of my knowledge, true and correct and that I have read and understood the Privacy Notice in SECTION H.

\_\_\_\_\_

Complainant

\_\_\_\_\_

Signature

\_\_\_\_\_

Date (YYYY-MM-DD)

**BY A LEGAL COUNSEL OR ANOTHER AUTHORIZED INDIVIDUAL (If you completed Section E, the individual named in that section MUST sign below)**

I (Authorized person\* / Legal counsel) certify that the information given on this form is, to the best of my knowledge, true and correct and that I have read and understood the Privacy Notice in SECTION H.

\_\_\_\_\_

Authorized person\* / Legal counsel

\_\_\_\_\_

Signature

\_\_\_\_\_

Date (YYYY-MM-DD)

**\*IMPORTANT: The authorized person (who is not a legal counsel) must retain a proxy and attach such document to this form. The complaint will be considered officially filed at the Labour Program the date the proxy is provided.**

**SECTION J - REMEMBER TO**

- ☐ Sign and date the form
- ☐ Complete all applicable sections

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Received date (YYYY-MM-DD):

Name of receiving official:

Received via: (check one)

☐ In person    ☐ Mail    ☐ Fax    ☐ Other:

Forwarded to (district office)

LA2000 / ILS Assignment No.:

Date Acknowledgement Letter of Receipt sent to complainant (YYYY-MM-DD):

**FOR OFFICE USE ONLY - EXTENSION OF TIME TO FILE A COMPLAINT**

**Complaint alleging Unjust Dismissal must be filed at any Labour Program office within 90 days from the date of dismissal.**

**Extension – An extension of time to file a complaint is applicable when:**

- a complaint was filed within the period established by the Code, but to a government official (e.g. a provincial or territorial government) who had no authority to deal with the complaint and the person making the complaint believed the official had that authority
- a previous Genetic Testing or Reprisal complaint based on substantially the same facts was filed within the 90-day statutory time limit and was withdrawn, and/or
- a previous Unjust Dismissal complaint based on substantially the same facts was filed within the 90-day statutory time limit and was withdrawn because it was incomplete or contained an error

**DECISION OF THE REGIONAL MANAGER**

By the power delegated to me by the Head of Compliance and Enforcement, I extend the period of time to file a complaint of Unjust Dismissal because I am satisfied that a:

- ☐ complaint was filed within the prescribed period of time to a government official who had no authority to deal with the complaint and the person making the complaint believed the official had that authority
- ☐ a previous Genetic Testing or a Reprisal complaint, based on substantially the same facts, was filed within the 90-day statutory time limit and it was withdrawn
- ☐ a previous Unjust dismissal complaint, based on substantially the same facts, was filed within the 90-day statutory time limit and was withdrawn because it was incomplete or contained an error

The date extended is the date that the present complaint was filed with the Labour Program.

Date (YYYY-MM-DD): \_\_\_\_\_

\_\_\_\_\_  
Name of the Regional Manager\_\_\_\_\_  
Signature\_\_\_\_\_  
Date (YYYY-MM-DD)☐ Extension of time is not granted\_\_\_\_\_  
Name of the Regional Manager\_\_\_\_\_  
Signature\_\_\_\_\_  
Date (YYYY-MM-DD)

Comments