



**APPLICATION FORM  
TO BE COMPLETED BY BOTH PARTIES**

**APPLICATION FOR NON-BINDING ARBITRATION**

**BETWEEN:**

The Employer \_\_\_\_\_

and

The Union \_\_\_\_\_

**The parties agree to the following conditions:**

1. The Grievance to be discussed will be that of \_\_\_\_\_

(Enclose a copy of the Grievance Form with replies at all steps.)

2. The process is considered an extension of the Grievance procedure and any discussions by the Parties or recommendations of the Panel shall be made without the prejudice to any further proceedings and the Parties agree that the Panelists are not compellable witnesses in any Arbitration hearing.
3. Any recommendation made by the Panel shall not be binding on either Party and either Party shall retain the right to proceed to Arbitration.
4. Any settlement of the Grievance is not precedent setting.
5. Outside Legal Counsel or Consultants will not be utilized.
6. Enclose a Statement of Agreed Facts.

**For the Employer**

**For the Union**

\_\_\_\_\_  
Please print name

\_\_\_\_\_  
Please print name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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Title

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Telephone Fax

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Date

\_\_\_\_\_  
Date

**This Application should be forwarded to:**

**LABOUR MANAGEMENT FORUM**  
c/o Labour Services Division  
5151 Terminal Road 7<sup>th</sup> Floor  
P.O. Box 697  
Halifax, Nova Scotia B3J 2T8  
phone: 424-5679 / fax: 424-1744

**\*\* Reminder:** Please submit your application fee with the application form