

PROVINCE OF PRINCE EDWARD ISLAND  
 THE PRINCE EDWARD ISLAND LABOUR ACT  
 REQUEST FOR APPOINTMENT OF A CONCILIATION OFFICER

IN THE MATTER OF A DISPUTE BETWEEN:

**Employer**

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- and -

**Trade Union**

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The undersigned requests the Minister Responsible for Labour to appoint a Conciliation Officer to confer with the parties in an endeavour to effect a collective agreement:

**- Relevant Information -**

Applicant:

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Address of Applicant:

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Telephone No. of Applicant: \_\_\_\_\_

Expiry Date of Current Agreement: \_\_\_/\_\_\_/\_\_\_ D / M / Y

Number of Employees in Bargaining Unit: \_\_\_\_\_

Company Bargaining Committee	Union Bargaining Committee
Spokesperson:	Spokesperson:
Address:	Address:
Telephone No:	Telephone No:
Email:	Email:
Cell No.	Cell No.
Fax No:	Fax No:
Others:	Others:

Particulars of Negotiation Meeting:

1) Date of Notice to Bargain: \_\_\_\_\_

2) Date of First Joint Meeting: \_\_\_\_\_

3) Dates of Other Meeting(s): \_\_\_\_\_

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Concise Statement of Clauses Still in Dispute:

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(If No Meetings Were Held) Efforts Made by the Employer or Trade Union to Arrange for a Meeting of the Parties With a View to Commence Bargaining for a Collective Agreement:

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Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_.

**N.B. A copy of the current collective agreement must be filed with this application.**

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Signature

Representing:  Employer  Union

\_\_\_\_\_  
Official Position

Address:  
\_\_\_\_\_

Telephone No: \_\_\_\_\_

Email: \_\_\_\_\_