

Grievance lodgement form

This form can be used to lodge a complaint or if you feel you have been treated unfairly while working in the Pacific Australia Labour Mobility (PALM) scheme. The form is to be completed by the worker (you) or a third party (someone you know and trust). Once the form is completed, please email to (palm@dewr.gov.au).

You can also tell us by calling the PALM scheme support service line on (1800 51 51 31) to lodge a complaint. Please note this line is monitored 8:30 am - 6:30 pm (AEDT), Monday to Friday. Calls made outside of these hours should be for critical incidents only.

The privacy statement and consent form can be found on the last page of this form.

Please ensure all responses are provided in English.

Has there been an attempt to resolve the issue/s
or concern/s with the employer (if applicable)?

YES

NO

Please provide details:

WORKER DETAILS

Name:

Nationality:

Phone number:

Email address:

Employer:

Host site (if applicable):

Are other workers impacted or involved?

YES

NO

If yes, please provide their names, nationalities, email addresses and phone numbers (if known):

DETAILS OF GRIEVANCE

What is your grievance? Include dates, workers involved and work location.

Can you provide evidence to support grievance? YES NO

If yes, please provide evidence – for example pay slips, emails, photographs or recordings.

If no, please provide details:

Is anyone in immediate danger? YES NO

If yes, have you contacted the police
or other appropriate authorities? YES NO

If yes, please provide details:

Have you spoken to anyone else about
this grievance (such as a union representative
or country liaison officer)? YES NO

If yes, please provide details:

Do you consent to the Department of Employment
and Workplace Relations disclosing your name
and details of the grievance to the employer? YES NO

DETAILS OF PERSON REPORTING THE GRIEVANCE

Name:

Organisation (if applicable):

Phone number:

Email address:

Best time to contact:

IF LODGING ON BEHALF OF A WORKER

What is your relationship
with the worker?

Do you have consent to act on behalf of the worker? YES

NO

If yes, please attach evidence:

IF FORM IS COMPLETED BY A DEPARTMENTAL OFFICER

Name of officer:

Privacy statement and consent form

Personal information collected by the Department of Employment and Workplace Relations (department) is protected by law, including under the Privacy Act 1988 (Privacy Act). Personal information is information or an opinion about an identifiable individual. Personal information includes an individual's name and contact details.

Collection of your personal information is for the purposes of enabling the department to accurately assess and manage the grievance process. If you do not provide some, or all the personal information requested, the department may be unable to accurately assess your grievance and therefore may not be able to continue with this process.

Your personal information may be shared with other government agencies and participating countries. Your personal information may also be disclosed to other parties where you have agreed, or where it is otherwise permitted under the Privacy Act.

The department's privacy policy, including information about how to make a complaint and seek access to or correction of your personal information, can be found at <https://www.dewr.gov.au/privacy> or by requesting a copy from the department at (privacy@dewr.gov.au). To contact the department about your personal information email (privacy@dewr.gov.au).

Collection of sensitive information

Sensitive information is a subset of personal information. It includes information or an opinion about your racial or ethnic origin, political opinions, religious beliefs or affiliations, philosophical beliefs, membership of associations or unions, sexual orientation or practices, criminal record, and health, genetic or biometric information.

We need your consent to collect your sensitive information unless the collection is otherwise permitted under the Privacy Act. You do not have to consent to the collection of your sensitive information. If you do consent, you can withdraw your consent at any time.

Overseas disclosure of personal information

We need your consent to disclose your personal information to overseas recipients unless otherwise permitted under the Privacy Act. You do not have to consent to the disclosure of your personal information to overseas recipients. If you do consent, you can withdraw your consent at any time.

If you consent to the disclosure of your personal information to overseas recipients, the department will not be required to take reasonable steps to ensure that the overseas recipients do not breach the Privacy Act.

By ticking this box and submitting this form, I confirm that I have read and understood this privacy statement and consent form.

By ticking this box and submitting this form, I confirm that I agree to the collection of my sensitive information in accordance with this privacy statement and consent form.

By ticking this box and submitting this form, I confirm that I agree to the disclosure of my personal information in accordance with this privacy statement and consent form to overseas recipients.

By ticking this box and submitting this form, I confirm that I have the consent of any third parties to the inclusion of personal information about them and have made them aware of this privacy statement and consent form.

Name:

Date: