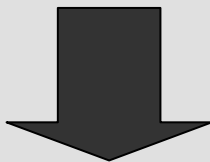


LRA Form 3.12  
Section 38(3)  
Labour Relations Act, 1995

**REFERRING PUBLIC  
SERVICE JURISDICTIONAL  
DISPUTES FOR  
CONCILIATION**



Read This First



**WHAT IS THE PURPOSE OF THIS  
FORM?**

If there is a dispute between two or more bargaining councils in the public service, including the PSCBC, the dispute must be referred to the CCMA in terms of Section 38 of the Labour Relations Act, 1995.

**WHERE DOES THIS FORM GO?**

To the CCMA National Office:  
28 Harrison Street  
Johannesburg  
Private Bag X94  
Marshalltown 2107

**Tel:** (011) 377 6650  
**Fax:** (011) 834 7351  
**E-mail:** ho@ccma.org.za

**OTHER PARTIES**

If more than one party is referring the dispute or if the dispute is referred against more than one party, write down the additional names and particulars on a separate piece of paper and attach details to this form.

**1. PARTY REFERRING THE DISPUTE**

Name: .....

.....

Postal Address:.....

.....

.....

Tel:..... Fax:.....

Cell Number: ..... Email: .....

Contact Person: .....

Registration Number: .....

**2. DETAILS OF OTHER PARTY**

Name: .....

.....

Postal Address:.....

.....

.....

Tel:..... Fax:.....

Contact Person: .....

Cell Number: ..... Email: .....

Registration Number:.....

**Case Number** .....

Please turn over —————>

## OTHER INSTRUCTIONS

A copy of this form must be served on the other party.

Proof that a copy of this form has been served on the other party must be supplied by attaching any of the following:

- A copy of a registered slip from the Post Office; or
- A copy of a signed receipt if hand delivered; or
- A signed statement confirming service by the person delivering the form; or
- A copy of a fax confirmation slip; or
- A copy of an email confirmation slip or sent email; or
- Any other satisfactory proof of service.

The CCMA may be requested to assist with service.

## CHECK!

Have you sent a copy of this completed form to the other party?

Have you included proof that you have sent a copy to the other party with this form?

### 3. NATURE OF THE DISPUTE

This image shows a full page of primary-ruled paper. It features multiple sets of horizontal dashed lines spaced evenly down the page, providing a guide for handwriting practice. The background is white, and there are no margins or other markings present.

#### 4. CONFIRMATION OF ABOVE DETAILS

Form submitted by:

.....  
(please print name)

Signature: .....

Position: .....

Date:.....

Place: .....



## COMMISSION FOR CONCILIATION, MEDIATION & ARBITRATION

**TO THE CCMA**

### **PROTECTION OF PERSONAL INFORMATION ACT, 4 OF 2013**

By signing this referral form, I/we hereby grant my/our voluntary consent that my/our personal information may be processed, collected, used and disclosed in compliance with the Protection of Personal Information Act, 4 of 2013. I/we furthermore agree that my/our personal information may be used for the lawful and reasonable purposes in as far as the CCMA (responsible party) must use my/our information in the performance of its public legal duty. I/we understand that my/our personal information may be disclosed to a third party in as far as the CCMA must fulfil its public legal duty. I/we furthermore understand that there are instances in terms of abovementioned Act where my express consent is not necessary to permit the processing of personal information, which may be related to litigation or when the information is publicly available. Further details are available on the CCMA website.

**SIGNED AT** \_\_\_\_\_ **ON THIS** \_\_\_\_\_ **DAY OF** \_\_\_\_\_ **202**\_\_

**INITIAL AND SURNAME:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_