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| **LRA Form 3.3**    **Section 29(1)**  **Labour Relations Act, 1995** |  | **APPLICATION FOR REGISTRATION OF A BARGAINING COUNCIL** |  |
| **READ THIS FIRST**  **WHAT IS THE PURPOSE OF THIS FORM?**  This form is an application for registration of a bargaining council.  **WHO FILLS IN THIS FORM?**  The registered trade unions and registered employers’ organisations who have jointly agreed to form a council.  **WHERE DOES THIS**  **FORM GO?**  The Registrar of Labour Relations, Department of Labour, Private Bag X117, Pretoria, 0001.  Fax 012-309 4156  Email: [registrar.labourrelations@labour.gov.za](mailto:registrar.labourrelations@labour.gov.za)  **OTHER INSTRUCTIONS**   * One completed copy of this form must be sent to the Registrar of Labour Relations. * Each employers’ organisation which is a party to the bargaining council must fill in page 4 of 6. * Each trade union which is a party to the bargaining council must fill in page 5 of 6. * Two signed copies of the constitution of the bargaining council must be attached to this form. * An authorized representative of each party must sign this form. * If there is insufficient space on the form, use a separate piece of paper. * A resolution to form a bargaining council to be attached. |  | 1. **NAME OF THE BARGAINING COUNCIL**   ..…………………………………………………………………………………….…………..…  ……………………………………………………………………………….………………......   1. **ADDRESS:**   Postal Address: …………………………………………………………….………………….  ……………………………………………………………………………………………………  Physical Address: ……………………………………………………….…………….……….  ………………………………….……………………………………………….………………..  Tel: ………………………………..……… Fax: …………….….….…….…………………   1. **NAME AND CONTACT DETAILS OF REPRESENTATIVE OF THE COUNCIL**   ………………………………………………………………………………………………..…..  ……………………………………………………………………………………………………   1. **DATE OF APPLICATION:**   ………………………………..…………………………………………………..………………   1. **PARTIES** 2. **Employers’ Organisations**   ………………………………….…………………………………………………………………  …………………………………….………………………………………………………………  …………………………………………….………………………………………………………   1. **Trade Unions**   ………………………………………………………………………….…………………………  ………………………………………………………….…………………………………………  …………………………………………………………….……………………………………… | |

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| **6)** | **REPRESENTATIVENESS OF THE Bargaining Council:** | | | |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Total number of employees falling within the proposed scope of the Bargaining Council and who belong to the trade unions which are party to the Council | |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Total number of employers falling within the proposed scope of the Bargaining Council and who belong to the employers' organisations which are party to the Council | |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Total number of employees employed within the proposed scope of the Bargaining Council by the employers that belong to the employers' organisations which are party to the Council | |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Total number of employers within the proposed scope of the Council | |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Total number of employees employed within the proposed scope of the Council | |
| **7)**  **8)** | **DATE OF FORMATION / FOUNDATION OF THE BARGAINING COUNCIL:**  …………………………………………………………………………………………………………………………………………  **SIGNATORIES:**  **7)** | | | |
|  |  | **Employers' Organisation** | |  |
|  | **Name** | …………………………………………………………………………………………………..……………………………. | | |
|  | **Position** | …………………………………………………………………………………………………..……………………………. | | |
|  | **Signature** | …………………………………………………………………………………………………..……………………………. | | |
|  | **Date** | …………………………………………………………………………………………………..……………………………. | | |
|  | **Tel.**  **Fax.**  **Name**  **Position**  **Signature**  **Date**  **Tel.**  **Fax.** | …………………………………………………………………………………………………..…………………………….  …………………………………………………………………………………………………..…………………………….  **Trade Union**  …………………………………………………………………………………………………..…………………………….  …………………………………………………………………………………………………..…………………………….  …………………………………………………………………………………………………..…………………………….  …………………………………………………………………………………………………..…………………………….  …………………………………………………………………………………………………..…………………………….  …………………………………………………………………………………………………..……………………………. | | |

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| **9)** | **PROPOSED SCOPE** |
| **10)** | 1. **Define the sector(s) in respect of which registration is sought:**   …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….   1. **Area(s):**   …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….  …………………………………………………………………………………………………………………………………....………….  **Name of Council Representative:** …………………………………………………………………………………………………….  **Date**: ………………………………………………… |

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| **REPRESENTATIVENESS OF EMPLOYERS’ ORGANISATION** |  | Number of their employees employed in the sector |  |  |  |  |  |  |  |  |  |  |  |  |
| **Name of Employers’ Organisation …………………………………………………………………………………………………………….** | Number of employers in the sector who are members of the employers’ organisation |  |  |  |  |  |  |  |  |  |  |  |  |
| Area  (state each area separately, indicating whether magisterial district, province or other) |  |  |  |  |  |  |  |  |  |  |  |  |

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| **REPRESENTATIVENESS OF TRADE UNION** |  | Number of union members employed in the sector |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Name of Trade Union ………………………………………………………………………………….** | Area  (state each area separately, indicating whether magisterial district, province or other) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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**CHECK!**

* **Have you prepared and signed a copy of this form?**
* **Have you prepared two signed copies of the council’s constitution?**
* **Have you attached copies of the resolution?**

**----------------------------------------------------------------------------------------------------------------------------------------------------------------**

**DEPARTMENT OF LABOUR DETAILS**

I, ……………………………………………………………………….. duly authorized thereto in terms of Regulation 7(2),

(name of official)

am satisfied that the information is substantially correct. The application was lodged with the Department of Labour on:

………………………………………………………………………………………………………………………………………….

(date)

Signature: ………………………………………………………………….

Date: ………………………………………………………………………..

Place: ……………………………………………………………………….