



REFUSAL TO WORK REGISTRATION

Refusal to Work in case of danger - Registration of Notification under subsection 129(1) of Part II of the Canada Labour Code.

1. Complainant's Name			
2. Address			3. Telephone Number (999-999-9999)
4. Occupation			5. Years of experience in present occupation
6. Employer's name			
7. Address			8. Telephone Number (999-999-9999)
9. Type of operation			
10a. When was complain discussed with employer? (yyyy-mm-dd)			
10b. With whom?		Title	
10c. Corrective measures taken?			
<input type="radio"/> Yes <input type="radio"/> No			
If yes, describe:			
11a. Safety and Health Committee or Rep.			
11b. Co-Chair Pers. Employer			
11c. Co-Chair Pers. Employee			
11d. Safety and Health Representative			
12. Statement of refusal to work			
Employer's request			
Date (yyyy-mm-dd)	Time	Name	Signature
Employee's request			
Date (yyyy-mm-dd)	Time	Name	Signature
OFFICE USE ONLY			
Complaint No.	File No. (Regional)	File No. (NHQ)	Receiving Office
Forwarded to (Office)	Date (yyyy-mm-dd)	Complaint Received by	
		<input type="radio"/> Telephone <input type="radio"/> Interview <input type="radio"/> Other	