**FOR CLAIMS UNDER $20,000 ONLY**

**MAGISTRATES’ COURT OF VICTORIA**

**AT MELBOURNE**

**INDUSTRIAL DIVISION**

**Court Case Number:**

**BETWEEN**

Employee

Of: *(address)*

**AND**

Employer

Of: *(address)*

**SMALL CLAIM RESPONSE FORM**

**TO THE EMPLOYEE**

AND

TO THE REGISTRAR OF THE MAGISTRATES’ COURT AT MELBOURNE

TAKE NOTICE that the Employer’s “Response to a Claim Made by an Employee / Other” is attached.

**RESPONSE TO A CLAIM MADE BY AN EMPLOYEE / OTHER**

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| **DETAILS THE EMPLOYER MUST COMPLETE** |
| 1. **Is the employer correctly identified in the Claim?**
 |  Yes [ ]  No [ ]  |
| 1. **If no, what is the correct name?**
 |       |
| 1. **Employer’s registered office or trading address**
 | **Address:**  **Postcode:**  |
| 1. **Details of contact person** **from employer**
 | **Name:**      **Work telephone:**  (     )      **Fax Number:** (     )      **Email Address:**      **Position:**        |

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| **DETAILS OF EMPLOYER’S REPRESENTATIVE (if any)** |
| 1. **Is anyone representing the employer?**
 |  No [ ]   Yes [ ]  [ ]  Employer organisation [ ]  Solicitor [ ]  Other representative |
| 1. **Name of employer organisation, solicitor’s firm or other representative**
 |       |
| 1. **Contact details of representative**
 | **Name:**      **Address:**       **Postcode:**      **Work telephone:**  (     )      **Fax Number:** (     )       |

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| **ADDRESS FOR SERVICE** |
| 1. **Where should court documents and notices to the employer be sent?**
 | **Address in questions 3-4** [ ]  **or 6-7** [ ]   |

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| **INDUSTRIAL INSTRUMENT** |
| 1. **Does the employer agree that the award, agreement or order (if any) referred to in the Claim is correct?**
 |  Yes [ ]  No [ ] If no, please state the award, agreement, Australian Workplace Agreement or order under which you the employee was employed:       |
| **EMPLOYER’S RESPONSE TO CLAIM** |
|  | The employer opposes each of the following claims made in the application: *(tick as appropriate & attach further sheets if necessary)* |
| [ ]  Wages $       | This element of the claim is: [ ]  admitted [ ]  not admitted [ ]  denied for the following reasons:       |
| [ ]  Leave entitlements $      | This element of the claim is: [ ]  admitted [ ]  not admitted [ ]  denied for the following reasons:       |
| [ ]  Penalty Rates $      | This element of the claim is: [ ]  admitted [ ]  not admitted [ ]  denied for the following reasons:       |
| [ ]  Allowances $      | This element of the claim is: [ ]  admitted [ ]  not admitted [ ]  denied for the following reasons:       |
| [ ]  Notice of Termination $      | This element of the claim is: [ ]  admitted [ ]  not admitted [ ]  denied for the following reasons:       |
| [ ]  Unauthorised deduction from wages $      | This element of the claim is: [ ]  admitted [ ]  not admitted [ ]  denied for the following reasons:       |

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| **THE HEARING** |
| If this matter proceeds to a hearing before the Court, does the employer intend to represent it/him/herself? Yes [ ]  No [ ]  |

**Signature and printed name of the employer or representative:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_