

Public Service Grievance Board
Suite 600 - 180 Dundas St. West
Toronto, Ontario M5G 1Z8 Tel. (416) 326-1388
www.psab.gov.on.ca

FORM 2a - Response

Political Activity / Disclosing and Investigating Wrongdoing Under The Public Service of Ontario Act, 2006

Name of Applicant(s):

- and -

Named Respondent(s):

This Respondent states as follows in response to the Application:

Correct name of this Respondent (if this Respondent is the Employer, identify the Ministry or Commission Public Body in which the applicant was employed):

Name of Representative:

**Name of Firm:
(where applicable)**

**Address of Firm:
(where applicable)**

Email:

Telephone:

Other Affected Parties

Name and other person(s) whose rights or interests may be affected by this Application. (Attach additional pages if necessary).

Name:

Address:

Email:

Telephone:

The person(s) or organisation(s) named above is/are affected by the application for the following reasons:

In consecutively numbered paragraphs, the Response must identify the facts and statements contained in the Application which you dispute, those with which you agree, and those about which you have no knowledge. In addition you should respond to the issues raised in the Application, and provide a clear and concise statement of the facts and events important to your position. Where more convenient this information may be provided as a separate appendix A attached to your Response.

If you have a preliminary objection to the Board's jurisdiction to consider this Application, include the basis for your objection, including both the relevant facts and statutory authority.

Describe what you want the Board to do with the Application. Where more convenient this information may be provided as a separate appendix B attached to your Application.

The Board offers alternative dispute resolution (ADR) services to assist the parties in resolving their differences by either appointing a mediator prior to the hearing or by referring the matter to a mediator/arbitrator. Refer to "A Quick Overview Of The Arbitration Process".

Please indicate
your Preference:

Mediation

Mediation/Arbitration

Arbitration

This response consists of _____ pages in total (include any Appendixes in your page count).

Name (please print) _____

Dated at _____ this _____ day of _____, 20 ____.

The completed signed response and any additional documentation, may be submitted to:
psgb.psgb@ontario.ca