

Federal  
Public  
Sector  
Labour  
Relations and  
Employment  
Board

Commission des  
relations de  
travail et de  
l'emploi dans le  
secteur  
public  
fédéral

F.P.S.L.R.E.B. File Number
FOR OFFICE USE ONLY

**Form 24**

*Subsections 92(1) and (1.1)  
of the Federal Public Sector Labour Relations Regulations*

**NOTICE TO THE CANADIAN HUMAN RIGHTS COMMISSION**

*Federal Public Sector Labour Relations Act*

**NOTICE:** (1) The party to a grievance who raises an issue involving the interpretation or application of the Canadian Human Rights Act within the context of a request for arbitration of the grievance must file this notice with the Canadian Human Rights Commission.

The Canadian Human Rights Commission mailing address is:

Intake Services  
Canadian Human Rights Commission  
344 Slater Street  
Ottawa ON K1A 1E1

- (2) This notice does not constitute a complaint to the Canadian Human Rights Commission.
- (3) A copy of the original grievance and of the notice of reference to adjudication (Form 20, 21, 22 or 23) must be attached.
- (4) A copy of this notice must be filed with the Board.
- (5) It is the grievor's responsibility to inform the Board of any changes to his/her mailing and electronic addresses or telephone numbers.
- (6) Information relating to the proceedings is subject to the Board's *Policy on Openness and Privacy*. In accordance with that policy, the Board conducts its hearings in public, except in exceptional circumstances. It also provides public access to case files and posts its decisions electronically on its website. The Board's *Policy on Openness and Privacy* is posted on the Board's website.

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**1. Information with respect to the party raising an issue involving the interpretation or application of the *Canadian Human Rights Act*:**

Last name (*print in block letters*): \_\_\_\_\_

First name (*print in block letters*): \_\_\_\_\_

Mailing address:

Apartment (*if applicable*): \_\_\_\_\_ Number and street: \_\_\_\_\_

City: \_\_\_\_\_ Province or Territory: \_\_\_\_\_ Postal code: \_\_\_\_\_

Telephone numbers (*where we can reach you*): Fax numbers (*where we can reach you*):

Home: (\_\_\_\_\_) \_\_\_\_\_ Home: (\_\_\_\_\_) \_\_\_\_\_

Office: (\_\_\_\_\_) \_\_\_\_\_ Office: (\_\_\_\_\_) \_\_\_\_\_

**Where information on more than one person is required in a section or the space provided is not sufficient, please attach additional pages of same-sized paper.**

E-mail address:

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**Name of authorized representative** *(if applicable)*:

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Mailing address *(if different from above)*:

Apartment *(if applicable)*: \_\_\_\_\_ Number and street: \_\_\_\_\_

City: \_\_\_\_\_ Province or Territory: \_\_\_\_\_ Postal code: \_\_\_\_\_

Telephone number: (\_\_\_\_) \_\_\_\_\_ Fax number: (\_\_\_\_) \_\_\_\_\_

E-mail address:

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**2. Information on the other party to the grievance:**

Name:

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Mailing address:

Apartment *(if applicable)*: \_\_\_\_\_ Number and street: \_\_\_\_\_

City: \_\_\_\_\_ Province or Territory: \_\_\_\_\_ Postal code: \_\_\_\_\_

E-mail address:

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**3. Description of the issue involving the interpretation or application of the *Canadian Human Rights Act* :**

**4. Prohibited ground(s) of discrimination involved:**

Race

National or ethnic origin

**Where information on more than one person is required in a section or the space provided is not sufficient, please attach additional pages of same-sized paper.**

- Colour
  - Religion
  - Age
  - Sex
  - Sexual orientation
  - Gender identity or expression
  - Marital status
  - Family status
  - Genetic characteristics
  - Disability
  - Conviction for an offence for which a pardon has been granted or in respect of which a record suspension has been ordered.
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**5. Corrective action sought:**

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I, the undersigned, (duly authorized representative of the party raising the issue), give notice to the Canadian Human Rights Commission under section (210, 217 or 222) of the *Federal Public Sector Labour Relations Act*, of an issue involving the interpretation or application of the *Canadian Human Rights Act*.

Date: \_\_\_\_\_  
(dd/mm/yyyy)

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(signature of party raising the issue or of representative)

**Where information on more than one person is required in a section or the space provided is not sufficient, please attach additional pages of same-sized paper.**

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(office held with party raising the issue, if appropriate)

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**Where information on more than one person is required in a section or the space provided is not sufficient, please attach additional pages of same-sized paper.**