

# UNISON

# Equal Pay

# CASE FORM

Local Government Single Status

**FOR MEMBERS, STEWARDS, BRANCHES & REGIONS**

**A. Name**

**B. Employer**

**C. Date of change**

**Version: February 2008**

## Notes to help you complete this form

Please read the guidance notes alongside the Case Form. Answering all of the questions now will ensure that UNISON has enough information to advise and assist you, and will avoid any delays. The completed Case Form will also help us monitor our casework support to members.

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### **To the member** *Please complete sections 1-9.*

There are guidance notes to help you fill in this form.

Please complete the form in block capitals and please complete all sections

When you have completed the form pass this form to your UNISON region, details in the box below.

**Equal Pay Unit**  
UNISON Regional Office  
24 Livery Street  
Birmingham  
B3 2PA

### **Conditions for providing assistance**

IMPORTANT! Please read the following *conditions for providing assistance*. You should only sign the declaration in section 9 if you agree to all of these conditions

- UNISON seeks to provide members with the best possible advice and assistance. UNISON will determine who is the most appropriate representative to assist you in your case.
- At all times you will be kept informed about the progress of your case and no decision will be made on your behalf without first consulting you. You do not have to accept the advice of your UNISON representative, but you should understand that support will be withdrawn if you do not do so. You have the right to complain or against such a decision if you are dissatisfied and should do so by writing to your Regional Secretary.
- UNISON representation is provided on the understanding that UNISON is your only representative. If you are seeking advice from a third party, UNISON reserves the right to withdraw continued assistance to you.
- While UNISON is assisting you, you must remain a fully paid up member. If you need more information about how to make subscription payments, please contact your branch secretary who will be able to assist you.

- UNISON is proud of our record of achievements on behalf of our members. Publicising our successes reminds employers of their responsibilities, and encourages more people to join UNISON. UNISON therefore reserves the right to use the details of your case and outcome in publicity or case study/learning material, although your name would only be used with your permission.
- UNISON representatives and members are required to treat one another with respect and dignity. Failure to do so by a UNISON representative entitles you to make a complaint to your Branch Secretary. Failure to do so by yourself may lead to UNISON assistance being withdrawn from your case.

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## **To the branch and region**

This CASE form has been designed to collect information from members regarding equal pay claims arising from single status negotiations. Its intention is to gather key facts to enable the union to move forward on the claim regardless of the local circumstances. Regions should process this form using guidance available from the centre and their regional equal pay contact.

**PLEASE COMPLETE IN BLOCK CAPITALS**

**1. Membership details**

Membership Number

1.1

If you joined UNISON within the last 13 weeks – please give the date you joined

1.2

**2. Member's correspondence details**

Title 2.1

2.2 First Name

2.3 Initial(s)

2.4 Surname

2.5 Address 1

Address 2

2.6 Town/City

2.7 County

2.8 Postcode

**3. Member contact details**

3.1 Home telephone number

3.2 Work telephone number

3.3 Mobile telephone number

3.4 Work extension number

3.5 Home email address

3.6 Work email address

3.7 Voice/Text number

**4. Member personal details**

4.1 Date of birth

4.2 National Insurance Number

4.3 Gender

Male  Female

4.4 Do you have a disability?

Please state any access needs

Yes  No

4.5 Ethnic origin (please tick one box only)

Bangladeshi

Chinese

Indian

Pakistani

Asian UK

Asian other

Black African

Black Caribbean

Black UK

Black other

White UK

Irish

White other

## 5. Member Employment Details – First job

FILL IN ONE SHEET FOR ALL CURRENT JOBS AND ANY JOBS WHICH HAVE BEEN SUBJECT TO A TUPE TRANSFER AND ANY JOBS THAT YOU HAVE LEFT IN THE LAST SIX MONTHS AND FOR WHICH YOU THINK YOU HAVE AN EQUAL PAY CLAIM

You should provide a copy of your contract of employment / letter of appointment and job description and if possible, a copy of your last 3 wage slips for each position held.

5.1 Name of employer	
5.2 Place of work	
5.3 Job title	
5.4 Start date	
5.5 Leaving date / date of any change to your contract	<p>Leaving date ..... Still doing this job <input type="checkbox"/></p> <p>Reason for leaving.....</p> <p>.....</p> <p>Date of contract change ..... No changes to my contract <input type="checkbox"/></p> <p>What were the changes to your contract .....</p> <p>.....</p> <p>.....</p>
5.6 Payroll number	
5.7 Gross pay (before tax and deductions)	<p>Hourly rate           £.....</p> <p>Annual salary       £.....</p> <p>Weekly wage         £.....</p>
5.8 Grade	
5.9 Spinal column point	
5.10 No. of hours worked per week	
5.11 Employment status	<p>Permanent           <input type="checkbox"/> Temporary           <input type="checkbox"/></p> <p>Fixed Term Contract   <input type="checkbox"/> Casual               <input type="checkbox"/></p>
5.12 Employment type	<p>Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Job Share <input type="checkbox"/></p>
5.13 Do you work in a school?	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, is this school voluntary aided or a foundation school?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
5.14 Has this job been TUPE transferred to a different employer?	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><b>If yes</b> please provide the <u>date of transfer</u> and the name of your <u>previous employer</u></p>
5.15 Have you signed any agreements with your employer on single status or equal or received any compensation payments?	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please give details and please provide copies of any agreements.</p>

## 6. Member Employment Details – Second Job

IF YOU HAVE MORE THAN ONE CURRENT JOB (OR JOB WHICH HAS BEEN SUBJECT TO A TUPE TRANSFER OR, JOB THAT YOU HAVE LEFT IN THE LAST 6 MONTHS) FOR WHICH YOU WISH TO MAKE A CLAIM, PLEASE FILL IN THE DETAILS HERE. IF THIS BOX DOES NOT APPLY TO YOU PLEASE LEAVE BLANK AND GO TO SECTION 8 (PAGE 8)

You should provide a copy of your contract of employment / letter of appointment and job description and if possible, a copy of your last 3 wage slips for each position held.

6.1 Name of employer	
6.2 Place of work	
6.3 Job title	
6.4 Start date	
6.5 Leaving date / date of any change to your contract	Leaving date ..... Still doing this job <input type="checkbox"/> Reason for leaving..... ..... Date of contract change ..... No changes to my contract <input type="checkbox"/> What were the changes to your contract ..... ..... .....
6.6 Payroll number	
6.7 Gross pay (before tax and deductions)	Hourly rate           £..... Annual salary       £..... Weekly wage         £.....
6.8 Grade	
6.9 Spinal column point	
6.10 Number of hours worked per week	
6.11 Employment status	Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Fixed Term Contract <input type="checkbox"/> Casual <input type="checkbox"/>
6.12 Employment type	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Job Share <input type="checkbox"/>
6.13 Do you work in a school?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, is this school voluntary aided or a foundation school? Yes <input type="checkbox"/> No <input type="checkbox"/>
6.14 Has this job been TUPE transferred to a different employer?	Yes <input type="checkbox"/> No <input type="checkbox"/> <b>If yes</b> please provide the <u>date of transfer</u> and the name of your <u>previous employer</u>
6.15 Have you signed any agreements with your employer on single status or equal or received any compensation payments?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please give details and please provide copies of any agreements.

## 7. Member employment details – Third job

IF YOU HAVE MORE THAN ONE CURRENT JOB (OR JOB WHICH HAS BEEN SUBJECT TO A TUPE TRANSFER OR, JOB THAT YOU HAVE LEFT IN THE LAST 6 MONTHS) FOR WHICH YOU WISH TO MAKE A CLAIM, PLEASE FILL IN THE DETAILS HERE. IF THIS BOX DOES NOT APPLY TO YOU PLEASE LEAVE BLANK AND GO TO SECTION 8 (PAGE 8)

You should provide a copy of your contract of employment / letter of appointment and job description and if possible, a copy of your last 3 wage slips for each position held.

7.1 Name of employer	
7.2 Place of work	
7.3 Job title	
7.4 Start date	
7.5 Leaving date / date of any change to your contract	Leaving date ..... Still doing this job <input type="checkbox"/> Reason for leaving..... Date of contract change ..... No changes to my contract <input type="checkbox"/> What were the changes to your contract ..... ..... .....
7.6 Payroll number	
7.7 Gross pay (before tax and deductions)	Hourly rate           £..... Annual salary        £..... Weekly wage          £.....
7.8 Grade	
7.9 Spinal column point	
7.10 Number of hours worked per week	
7.11 Employment status	Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Fixed Term Contract <input type="checkbox"/> Casual <input type="checkbox"/>
7.12 Employment type	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Job Share <input type="checkbox"/>
7.13 Do you work in a school?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, is this school voluntary aided or a foundation school? Yes <input type="checkbox"/> No <input type="checkbox"/>
7.14 Has this job been TUPE transferred to a different employer?	Yes <input type="checkbox"/> No <input type="checkbox"/> <b>If yes</b> please provide the <u>date of transfer</u> and the name of your <u>previous employer</u>
7.15 Have you signed any agreements with your employer on single status or equal or received any compensation payments?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please give details and please provide copies of any agreements.

### 8.Previous postions (Complete if applicable)

Please list all previous jobs with your current employer, going back 6 years. Include all changes in job title/grade due to promotion. Please continue on an additional sheet if necessary. Please include your membership number on any additional sheet.

8.1 Job Title and Place of Work	8.2 Grade	8.3 Spinal column point	8.4 Date Started	8.5 Date Finished	6.6 Reason for finishing eg Compulsory transfer, left voluntarily, voluntarily applied for new post



**9. Remedy sought (by member) – The following standard wording is being used to cover all requests for assistance with equal back pay:**

9.1 Consider the merits of a potential equal pay claim and lodge a claim with an employment tribunal if appropriate.  I accept that there is not a binding commitment by UNISON to pursue such a claim.
9.2 Has anyone other than UNISON advised or acted on your behalf in relation to equal pay? Yes* <input type="checkbox"/> No <input type="checkbox"/>
<b>*If yes, please give name and organisation of who has advised/acted and give brief details of advice given or action(s) taken</b>
9.3 Name
9.4 Organisation
9.5 Action taken

**10. Declarations**

I confirm that I have read and agree to UNISON's conditions of assistance at the beginning of this form. I confirm that the contents of this form are a correct record of events, and I agree to this information being shared with a third party in respect of any action. UNISON is registered under the Data Protection Act 1998.

\*Please note that there are strict time limits associated with making an equal pay claim. It is YOUR RESPONSIBILITY to keep UNISON informed of any changes to your employment, including any changes you may have in the future. Time begins to run from the date your employment comes to an end for any reason, such as resigning or retiring. Time also runs from the date of a change of job with the same employer. The six month time limit can also be triggered when there is a change of contract with the same employer, such as when your terms and conditions of employment have changed whether or not you were required to sign a new contract. For example, this may simply be a change of hours. Time may also run where you continue in the same job but your job is transferred to a new employer (sometimes known as TUPE transfer). Appendix B of the guidance notes contains further information about time limits.

10.1 Signature of member

9.2 Date of member's signature

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10.2 Any other information

10.3 List of documents attached:

Pay slips

Contracts of employment

Letter of appointment

Job description

Other documents  Please specify.....

.....  
.....

**11. Details of action taken by the Region**

Date form received

Date grievance lodged

Date logged on CASE

Additional information (if appropriate)

FILE NUMBER		FOR REGIONAL OFFICE USE ONLY	
<b>CASE TYPE</b>		<b>SUB TYPE</b>	