

| | Reference No |
|--|---|
| | Applicant/s |
| | Respondent/s |
| NOTICE OF | APPLICATION FOR CONDONATION |
| | e Applicant intends to apply for condonation of or conciliation/arbitration on a date to be determine |
| An affidavit or statement i | n support of the application is attached hereto. |
| application, an answering and the Applicant 14 days application may be heard | ld the Respondent party wish to oppose the affidavit or statement must be delivered to NBCRI after service of the application, failing which the in the absence of the Respondent's affidavit. (NB: alt with in terms of CCMA Rule 31). |
| Signed at | on: |
| А | oplicant/s details: |
| | Address: |
| | |
| To: NBCRFI 31 De Korte Street, Braar Private Bag X69, Braamfo | |
| And to: Respondent/s det Address: | |
| | |

NB: Please note that condonation application must be served on the Employer party and furnish the NBCRFI with proof of service thereof.

APPLICATION FOR CONDONATION IN RESPECT OF UNFAIR DISMISSAL DISPUTE

| | | REFERENCE NUMBER: | |
|---------------|-------|--|--|
| | | (Applicant/Employee) | |
| and | | (Applicant Employee) | |
| anu | | | |
| | | (Respondent/Employer) | |
| | | AFFIDAVIT | |
| I, the | e und | ersigned, | |
| | | (Full name of Employee/Employer) | |
| do h | ereby | make oath and say: | |
| 1. Background | | | |
| | 1.1 | Applicant was dismissed on: | |
| | | | |
| | 1.2 | Respondent refused to reinstate applicant on: | |
| | | | |
| | 1.3 | The dispute arose on: | |
| | | - | |
| | | after all attempts to negotiate or follow other internal procedures including an appeal hearing at the company failed. | |
| 2. | Deg | ree of Lateness | |
| | 2.1 | The referral is days late. | |
| | 2.2 | Applicant did the following to pursue his/her rights after his/her dismissal: | |
| | | 2.2.1 Applicant went to his/her union, / the Department of Labour / Community | |
| | | Advice Centre / Legal Advice Centre / CCMA on | |
| | | 2.2.2 Applicant telephoned his/her union, / the Department of Labour / | |
| | | Community Advice Centre / Legal Advice Centre / CCMA on | |
| | | 2.2.3 Applicant signed the referral form on | |

| 3. | Reasons for Lateness | | |
|--------|---|--|--|
| | The reason/s that applicant referred the matter late is | | |
| | | | |
| | | | |
| | | | |
| 4. | Prospects of Success | | |
| | Applicant believes that he/she has good cause because (explain with good reasons why dismissal is unfair) | | |
| | | | |
| 5. | Prejudice | | |
| J. | As the applicant (employee), if condonation is not granted, I will be prejudiced because | | |
| | | | |
| | | | |
| | | | |
| | As the respondent (employer), if condonation is granted, I will be prejudiced because | | |
| | | | |
| | | | |
| 6. | General | | |
| | Any other relevant information | | |
| | | | |
| | | | |
| | | | |

| Applicant signature | Respondent signature |
|---------------------------------------|---|
| Signed before me on | |
| Signed before me onat | |
| by the deponent who acknowledges that | t he/she knows and understands the contents of the path / affirmation and considers it binding on his/her |
| Commissioner of | |
| Oaths | |
| Name | |
| Address | |
| | |
| Capacity | |