



## REFUSAL TO WORK REGISTRATION

**Refusal to Work in case of danger - Registration of Notification under subsection 129(1) of Part II of the Canada Labour Code.**

1. Complainant's name

2. Address

3. Telephone Number  
(area code)

4. Occupation

5. Years of experience in present occupation

6. Employer's name

7. Address

8. Telephone Number  
(area code)

9. Type of operation

10. a) When was complaint discussed with employer? Date \_\_\_\_\_

b) With whom? \_\_\_\_\_ Title \_\_\_\_\_

c) Corrective measures taken? Yes No If yes, describe

11. a) Safety and Health Committee or Rep. \_\_\_\_\_

b) Co-Chair Employer \_\_\_\_\_

c) Co-Chair Employee \_\_\_\_\_

d) Safety and Health Representative \_\_\_\_\_

12. Statement of refusal to work

Employer's request	Date	Name	Signature
	Time		
Employee's request	Date	Name	Signature
	Time		

### OFFICE USE ONLY

Complaint No.	File No. (Regional)	File No. (NHQ)	Receiving Office
Forwarded to (Office)	Date	Complaint received by <input type="checkbox"/> Telephone <input type="checkbox"/> Interview <input type="checkbox"/> Other	