

# Checklist – Request for Conciliation Form



## 1. Filling out the form

*Make sure you have provided the following information:*

- Your full name, personal details and contact information
- Do you need an interpreter?  
*Your family and friends cannot interpret for you at the conference. We can arrange a free interpreter to assist you.*
- If so, what language and/or dialect do you need?
- Authorised agent/self-insurer's name (who is handling your claim?)
- Your claim number
- Free Assistance at Conciliation (by ticking the relevant box)
- Employer details (name, address, contact number)
- The date of the decision made by the authorised agent/self-insurer (if applicable). This is likely to be the date on the letter.
- The date you received the decision (if applicable) Note: A 60 day time limit applies to lodgement
- Details about why you are applying for conciliation – what are you disputing and what outcome do you desire?

Assistance can be provided from either your union, Union Assist or WorkCover Assist.

If you are a member of or have previously been a member of a union you should contact Union Assist on 9639 6144 or the union directly for advice and assistance.

Alternatively, assistance can be provided by WorkCover Assist.

If you have any questions regarding assistance at Conciliation please contact the Conciliation Service on 9940 1111.

## 2. Attach these documents to the form:

- A copy of the original letter from the authorised agent/self-insurer advising you of the decision (if applicable) – include the entire letter, including “reasons for the decision”.  
*Internal Review and Senior Review notices are not sufficient.*
- If the dispute concerns a failure to respond to a request for compensation you must include a copy of the request that was made to the authorised agent/self-insurer.
- Other documents that may assist in resolving the dispute (medical reports, copies of accounts or receipts, payslips, certificates of capacity).
- Reasons for late lodgement if 60 days have passed since receipt of the authorised agent/self-insurer's decision letter.

## 3. Final step

The worker must personally sign and date the form.

*The worker must sign the request themselves. If the worker cannot personally sign the form, reasons explaining why they cannot sign must be attached.*

# Request for Conciliation

Office use   
Ref/ Act Section

Please read the back of this form before completing this page.

**Further information is available at our website: [www.conciliation.vic.gov.au](http://www.conciliation.vic.gov.au)**

## Worker Details

Title  Given Name  Family Name

Postal Address   
 Post Code


Date of Birth  Female   
Male   
Other/Prefer not to say

Home Phone\*  Mobile Phone\*  Other Phone

\*at least one phone number is required Email

Preferred Contact Method (please tick one only): Email  Regular Mail

## Conciliation

 Do you need an interpreter? (Interpreters are arranged by the ACCS) Yes  No

If Yes, what language and/or dialect?  Is there a 2nd preference?

Do you require assistance at conciliation? Yes  No

If Yes, please indicate which assistance provider below:

WorkCover Assist  Union Assist  Other Union (specify)  Other (specify)

\*You are not required to have assistance at conciliation. More information is available on our website.

## Agent / Self Insurer and Employer Details

Authorised agent/self-insurer  Claim Number

Employer Business Name  Employer Contact Name

Employer Address  Post Code

## Dispute Details

1. Are you disputing a decision made by the authorised agent/self-insurer? Yes  No

*If yes, proceed to question 2. If no, proceed to question 4.*

2. Date of decision  **You must attach a copy of the decision.**

Has 60 days passed since the date of the decision? Yes  No

If yes, your dispute may be late. Please attach reasons for late lodgement.

3. If the dispute relates to a failure to respond to a request, **you must attach a copy of the request made.**

4. Why are you applying for conciliation? (attach an additional piece of paper if you need more space)

Signature of party requesting conciliation  Date

Print name:

### **This form may be lodged as follows:**

**Fax:** (03) 9940 1000 **Email:** [rhc@conciliation.vic.gov.au](mailto:rhc@conciliation.vic.gov.au) **Mail:** ACCS, GPO Box 251, Melbourne 3001.

# How conciliation may be able to help you

If you have a dispute regarding a Workers' Compensation claim, you can request conciliation by the Accident Compensation Conciliation Service.

## Privacy Statement

The Accident Compensation Conciliation Service (ACCS) is a body corporate established under the current workers' compensation legislation. Personal and health information collected by the ACCS will be used for the purposes of processing and assessing this request for conciliation and conduct of the conciliation. It may also be used for other purposes related to the conciliation process, including administration and evaluation of the ACCS.

**The ACCS may disclose personal and health information to your union or any other person who you have nominated to assist you; other parties to the conciliation; courts or tribunals; and any person or organisation authorised by you, or by law, to obtain it.**

The ACCS is subject to secrecy provisions in the current workers' compensation legislation and only discloses information in accordance with that legislation. You are required to give part of this information to the ACCS by the current workers' compensation legislation. If you do not provide any part or all of this information, your request for conciliation may not be accepted or processed. You may gain access to your personal and health information collected by the ACCS by contacting us directly (details provided below). The ACCS's policies for the management of personal and health information are also available.

## What is the Accident Compensation Conciliation Service?

The Accident Compensation Conciliation Service (ACCS) provides an independent service to resolve Workers' Compensation disputes. The objective of the ACCS is to be fair, quick and informal. Most disputes are resolved at meetings (called conferences) or over the phone between the people involved in the dispute.

City, country or work site conferences can be arranged and a free interpreter service is available.

No fee is charged by the ACCS.

## What is conciliation?

Conciliation is an informal process which endeavours to help all parties in dispute to reach agreement through discussion. If the dispute is regarding a decision of an authorised agent/self-insurer you must request conciliation within 60 days of receiving the decision.

## What will happen at conciliation?

All parties will be invited to attend a conference with a Conciliation Officer. The aim is to find a solution which is agreeable to all.

Please take note that:

- you will be asked to supply information (e.g. medical reports) in support of your view.
- you can be accompanied by an assistant and/or family member or friend.
- a solicitor can only attend a conciliation conference if all parties (worker, employer, Conciliation Officer and the authorised agent/self-insurer) agree.
- The authorised agent/self-insurer is liable to:
  - a) Pay your reasonable transport expenses to and from the Conciliation conference.\*
  - b) Reimburse you for any loss of income sustained by attending the Conciliation conference.\*

\*You will be advised of the maximum amounts that can be claimed when you are notified of your conference date and time.

## What happens if the dispute is not resolved at conciliation?

If the dispute is not resolved, a certificate may be issued which allows you to proceed to the Court system.

## Step 1 Fill in this form

Complete the details on the front of this form.

If you are objecting to a decision of an authorised agent/self-insurer you must attach:

- a copy of the authorised agent/self-insurer decision, including reasons for the decision.
- if the dispute relates to a failure to respond to a request, a copy of the request.
- anything else which may assist to resolve the dispute e.g. medical reports, copies of accounts etc.

Please note: Information provided may be given to other parties to the conciliation.

Interpreter: The ACCS arranges professional, accredited interpreters.

## Step 2 You must sign this form

## Step 3 Send the form to:

Accident Compensation Conciliation Service  
GPO Box 251, Melbourne Victoria 3001

Fax: (03) 9940 1000 Email: [rhc@conciliation.vic.gov.au](mailto:rhc@conciliation.vic.gov.au)

The ACCS will write to you to confirm that your request has been received. If you require assistance completing this form, please contact the ACCS (details provided below).

## Late applications

If you think your request will be received by the ACCS more than 60 days after you received or were told about the decision, you must attach written reasons why this request is late. Late requests may not be accepted.

## Enquiries & Further Information

Accident Compensation Conciliation Service  
Level 1, 215 Spring Street  
Melbourne, Victoria 3000

Telephone: (03) 9940 1111

Freecall: 1800 635 960

Email: [info@conciliation.vic.gov.au](mailto:info@conciliation.vic.gov.au)

Internet: [www.conciliation.vic.gov.au](http://www.conciliation.vic.gov.au)

**If you cannot understand this form please contact 131 450. Ask the interpreter to contact the ACCS on 1800 635 960 or 9940 1111 to explain this form.**

إذا لم تفهم هذا النموذج، يرجى الاتصال بالرقم 131 450. وأطلب من المترجم أن يتصل بالرقم 1800 635 960 أو 9940 1111.

如果您无法读懂此小表格，敬请联络131 450，以便在传译员的帮助下打电话给1800 635 960或9940 1111。

Ako ne razumijete ovaj obrazac, nazovite 131 450 i zamolite tumača da nazove 1800 635 960 ili 9940 1111

W przypadku problemu ze zrozumieniem tego formularza należy zadzwonić pod numer 131 450 i poprosić tłumacza o zadzwonienie pod numer 1800 635 960 albo 9940 1111

Se non riuscite a capire questo modulo siete pregati di chiamare l'131 450 e di chiedere all'interprete di chiamare l'1800 635 960 o il 9940 1111

Ако за Вас овој формулар е неразбирлив, телефонирајте на 131 450 и побарајте од преведувачот да телефонира на 1800 635 960 или 9940 1111

Αν δεν μπορείτε να καταλάβετε αυτό το έντυπο παρακαλούμε τηλεφωνήστε στον αριθμό 131 450 και ρωτήστε τον διερμηνέα να καλέσει τον αριθμό 1800 635 960 ή 9940 1111

Ако не разумете овај формулар, молимо вас да назовете 131 450 и замолите тумача да назове 1800 635 960 или 9940 1111

Si tiene dificultades en entender este formulario, llame al teléfono 131 450 y solicite al intérprete que se comunique con el número 1800 635 960 ó 9940 1111

Bu formu anlamamaniz durumunda, lütfen 131 450 numarayı arayınız ve tercümandan 1800 635 960 ya da 9940 1111 numarayı aramasını isteyiniz.

Nếu quý vị không hiểu nội dung mẫu đơn này xin gọi số 131 450 và nhờ thông ngôn viên gọi số 1800 635 960 hay số 9940 1111