



INDUSTRIAL COURT OF THE REPUBLIC OF TRINIDAD AND TOBAGO

CASE MANAGEMENT FORM

DISPUTE NUMBER	

(1) Parties

i. Name of Union: _____

ii. Name of Company: _____

iii. Name of Filing Party: _____

(2) Contact number: (work) _____ (cell) _____

(3) Are you interested in having your Case Management Conference virtually? Yes No

(4) Email address: _____

(5) Are you at present engaged in bilateral talks with the other party before this dispute is listed? Yes No

(6) Do you wish to have conciliation at the Court? Yes No

Any other comments

Date _____

Submitted by _____

Please note if you have elected to have open court hearing you must file all documents pursuant to and in accordance with the notice attached hereto.

This form is to be returned within 10 working days to the Registry of the Court at:

#7 St. Vincent Street
Port of Spain
Tel: 225-4288 ext. 2201-9/2213/2310
Fax: 623-6179

or

#6 Irving Street (North)
San Fernando
Tel: 225-4288 ext. 1103-5
Fax: 657-0965

The Registry office is open between the hours of 8:00 a.m. and 4:00 p.m., Mondays to Fridays except public holidays and Court holidays.