

Australian Government Merit Protection Commissioner



MERIT PROTECTION COMMISSIONER

Merit Protection Commissioner secondary review of an APS or Parliamentary Service action

Application form

Where to lodge?

You will need to lodge this form with your agency. They will send it to us, with all relevant documents, within 14 days. We can't accept this form directly from you.

Who should use this form?

Use this form if you have received an outcome from an internal (primary) review by your agency, and you are not satisfied your concerns have been resolved. You can also use this form if your agency has advised that your application for internal (primary) review was not eligible.

You can apply for a secondary review by the Merit Protection Commissioner if each of the following apply:

the action or decision has impacted you, in your employment

you are an APS or Parliamentary Service employee (but not an SES level employee)

it is not a decision about a breach of the Code of Conduct or sanction (these have a different form, see our website <u>www.mpc.gov.au</u>)

you have lodged an internal (primary) review with your agency, and have received an outcome.

Part A — tell us about the action or decision

What is the action or decision that you sought primary review of with your agency?

Are there any aspects of that action or decision that you no longer wish to seek review of? (*i.e. have some of your concerns been resolved? Or do you wish to seek secondary review of only some of the matters raised?*)

On what date was the action taken or decision made?

Who took the action or made the decision?



What concerns do you have about the action or decision?

What outcome are you seeking?

Is there any other relevant information we should know about?

Are there any factors that make this application urgent? e.g. do you think your employment may be terminated?

Part B — your personal details

| Ms | Mr | Dr | other (specify) | | N/A |
|---|-------|------|-----------------|-----------------|-----|
| Your name: | | | | | |
| | | | | | |
| Your agency: | | | | | |
| | | | | | |
| Your email address: | | | | | |
| | | | | | |
| Preferred phone num | per: | Work | Personal | other (specify) | |
| | | | | | |
| Alternative phone nun | nber: | Work | Personal | other (specify) | |
| | | | | | |
| Your postal address (only if you are unable to receive emails): | | | | | |



Job title and current classification:

Substantive classification:

Do you have any special requirements to enable you to participate in this review?

Please ensure you let us know if these details change. If we can't reach you, we may not be able to continue with our review.

We will use the information on this form to assess whether your application is eligible. After we assess your application, we will contact you to discuss if your review is eligible, and if so, we will contact you to explain how the review will proceed. More information about the review process is available at www.mpc.gov.au

| Signature: | Date: |
|------------|-------|
| | |
| | |

Feedback

We will email you a survey about your experience after we finalise the review. The survey is voluntary and anonymous.

Privacy

We are committed to protecting and maintaining the personal information we collect in accordance with the Privacy Act 1988. Our privacy policy and a collection notice detailing how your (or third-party) personal information is collected, used and disclosed is available at www.mpc.gov.au.

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