

Statement of Claim Form – Employment Dispute

The **statement of claim form** sample for employment dispute provides a clear template to outline the details and allegations in a workplace conflict. It helps employees or employers present their case effectively in legal proceedings. Using this form ensures that all necessary information is included to support the dispute resolution process.

1. Claimant Details

Full Name:

Address:

Phone:

Email:

2. Respondent (Employer) Details

Employer Name:

Address:

3. Employment Details

Position Held:

Start Date:

End Date (if applicable):

4. Statement of Claim

Describe the nature of your claim and relevant facts:

List supporting documents attached (if any):

5. Remedy Sought

Describe the outcome or remedy you seek:

6. Declaration

I declare that the information provided above is true and correct to the best of my knowledge and belief.

Signature:

Date:

Submit Statement of Claim