

FORM 6
LABOUR RELATIONS BOARD (PRINCE EDWARD ISLAND)
APPLICATION FOR AMENDMENT OF CERTIFICATION ORDER

BETWEEN:

APPLICANT

AND:

RESPONDENT

1. Name of Applicant: _____
Address: _____

2. Name of Respondent: _____
Address: _____

3. The applicant requests an amendment to certification order number _____
issued by the Board on the _____ day of _____, 20_____.

4. Description of requested amendment: _____

5. Name of any trade union or employee organization known to the applicant as claiming to be
the bargaining agent of, or as claiming to represent, any employees affected by this application.

6. Reasons for requesting amendment: _____

I hereby declare that the statements made and information given herein are true in substance and
in fact and I make this solemn declaration conscientiously believing it to be true, knowing that it
is of the same force and effect as if made under oath and by virtue of the *Evidence Act* R.S.P.E.I.
1988 Cap. E-11.

DECLARED by the _____)
before me at _____)
in the County of _____)
Province of _____)
this _____ day of _____ 20 _____.)

A Commissioner for taking affidavits in the
Supreme Court

Respondent

Title