Form F46 - Application to make, vary or revoke a modern award

Fair Work Act 2009, ss.157-161

This is an application to the Fair Work Commission to make a modern award or make a determination varying or revoking a modern award, in accordance with Part 2-3 of the Fair Work Act 2009

The Applicant

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These are the details of the person who is making the application.

Title	[] Mr [] Mrs [] N	s [] Other please specify:	
First name(s)	Alexander		
Surname	Smith		
Postal address			
Suburb			
State or territory	NSU	Postcode	
Phone number		Fax number	
Email address			

If the Applicant is not an individual, please also provide the following details

Applicant's legal name	
Applicant's trading name	
Applicant's ABN/ACN	
Contact person	

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Does the Applicant need an interpreter?



If the Applicant has trouble accessing this information, please contact us. We can arrange to provide it in another format. You can find information about help for non-English speakers on our website.

[] Yes – Specify language			
INO			
Does the Applicant require any special (eg a hearing loop)?	l assistance a	t the hearing o	r conference
[] Yes – Please specify the assistance req	uired		
Does the Applicant have a representat	ive?		
A representative is a person or or be a lawyer or paid agent, a union There is no requirement to have	n or employer	organisation, or	g the applicant. This might a family member or friend.
[] Yes – Provide representative's details b	elow		
[TNo			
Applicant's representative			
These are the details of the personny).	son or organisa	ation who is rep	resenting the Applicant (if
Name of person			
Firm, organisation or company			
Postal address			
Suburb			
State or territory		Postcode	

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Phone number

Fax number

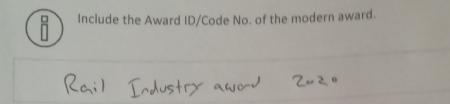
Email address

Is the Applicant's representative a lawyer or paid agent?

- [] Yes
- [] No

1. Coverage

1.1 What is the name of the modern award to which the application relates?



1.2 What industry is the employer in?

Railway

1.3 Does the application relate to the Care and Community Sector?

The Care and Community Sector includes, but is not limited to, the aged care, early childhood education and care and disability care sectors. Applications to make, vary or revoke awards that relate to the Care and Community Sector are decided by Care and Community Sector Expert Panels. See sections 617(8) and (9) of the FW Act.

[] Yes
[No

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2. Application2.1 What are you seeking?

Specify which of the following you would like the Commission to make:

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	modern award
[]a	determination revoking a modern award

2.2 Does the application seek to vary modern award minimum wages?

[1 Yes

[] No

2.3 Does the application relate to gender pay equity?

Variations to awards relating to substantive gender pay equity matters are decided by pay equity Expert Panels. See sections 617(6) and (9) of the FW Act. See also work value reasons in s.157(2A) and (2B).

[] Yes
[] No

2.4 What are the details of your application?

Outline the changes you are asking the Commission to make. For example - if you are asking the Commission to vary an existing award, you should set out which parts of the award you are asking the Commission to change and how you think these parts should be changed.

Rail Protection officers covered under the overed have a safety critical role. This role oward have a safety critical role. This role has a great deal of responsibility for the liver has a great deal of responsibility for the liver has a great deal of responsibility for the liver has a works of workers on site. we protect the works & worksite from rail traffic. It is high stress of involves alot of travel. Therefor the role needs to be remonerated higher.

Attach additional pages, if necessary.

2.5 What are the grounds being relied on?

Using numbered paragraphs, specify the grounds on which you are seeking the proposed variations.

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You must outline how the proposed variation etc is necessary in order to achieve the modern awards objective, and the minimum wages objective if it applies, as well as any additional requirements set out in the FW Act.

Higher wages will help attract higher avesity

condidates to this important & over looked

Fole. The role is denawling & without

Sufficient renuneration we can't get avesity staff.

Attach additional pages, if necessary.

Signature



If you are completing this form electronically and you do not have an electronic signature you can attach, it is sufficient to type your name in the signature field. You must still complete all the fields below.

Signature	
Name	Alex Suith
Date	19/1/24
Capacity/Position	Protection officer



Where this form is not being completed and signed by the Applicant, include the name of the person who is completing the form on their behalf in the Capacity/Position section.

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR OWN RECORDS