

An appointment has been made for you to see an employment specialist from
Attwells Solicitors at the Citizens Advice Chelmsford offices on:

.....
If you are unable to make this appointment, please contact this office on
01245 205605



We Can Help

Citizens Advice Chelmsford

**Provides a free, confidential and independent advice service
with Specialist help with employment problems**

Have you been dismissed or made redundant from work?

Are you being disciplined by your employer?

Has your employer failed to pay your wages?

**Are you suffering from discrimination on the grounds of sex,
race, religion, age, pregnancy or disability?**

Independent – Impartial – Confidential – Free



CITIZENS ADVICE CHELMSFORD

**We are an independent advice agency
Our advice is FREE & CONFIDENTIAL**

Employment Advice and Client responsibilities

In order to gain the maximum benefit from our service it is essential that you understand what this agency is able to do and what we expect you to do.

If there is anything in this document that you do not understand, please do not hesitate to ask, we are here to help you.

We will:

1. Hold a meeting with you to establish the facts surrounding your employment
2. Outline your possible options, assessing compensation or other outcomes
3. Decide with you on a plan of action

We expect you to:

1. Attend your appointment or let us know in advance if you are unable to do so. If you miss an appointment without letting us know, we will note this on your record and assume you no longer need our help.
2. Supply all relevant documentation, (list included with this form). This information is essential and will enable us to offer you the correct advice for your situation.

In the event of you not keeping to this agreement, the agency has the right to stop acting on your behalf.

CLIENT INFORMATION DETAILS
General Instructions

*Carefully read through each section.
Then, please complete this form, providing as much detail as possible*

Please bring all your paperwork and your completed form with you when you attend your first appointment

Title & Full Name:

Address:.....

Postcode:

Telephone No: (h)

(m)

(w)

Email:

Date of Birth: **Nat. Ins Nos.:** **Any Disability:**

Employment:

Full Time	<input type="checkbox"/>	
Part Time	<input type="checkbox"/>	Hours:
Unemployed	<input type="checkbox"/>	Since:
Full Time Carer	<input type="checkbox"/>	
Retired	<input type="checkbox"/>	
Other (please state)	<input type="checkbox"/>	

In receipt of:

Job Seekers Allowance	<input type="checkbox"/>	
Employment Support Allowance	<input type="checkbox"/>	
Income Support	<input type="checkbox"/>	
Disability Living Allowance	<input type="checkbox"/>	Higher/middle/lower rate?

Gross Annual Income: **Savings:**

Employment Information

Employer's Details / Former employer's details	
Employer's Name:	
Address:	
Tel:	
Fax:	
Contact Name:	
Number of staff:	
Background	
Job Title:	
Start Date:	
Date of Dismissal or Termination Date:	
If discrimination date of last incident:	
LIMITATION DATE: (advisor to complete)	
Details of salary/package	
Salary (before tax)	
Salary (after tax)	
Paid Weekly or Monthly?	
Any other benefits Pension Bonus Car LTIPS Share Plans Other	
What is your current employment status? E.g. employed, unemployed, self-employed	
If you have been dismissed, what was the reason for your dismissal? (brief details)	
If dismissed, are you currently making efforts to obtain alternative employment (please keep copies)? If not, why not?	

If dismissed, have you found alternative employment at the present time? If so, please provide current earnings in this employment	
Are you currently in receipt of any benefits, in particular Income Support and/or Job Seekers Allowance?	
If you are employed, do you have an on-going problem at work? If so what is it? (brief details)	
When were you last paid by your employer?	
LIMITATION DATE: (advisor to complete)	
Are you owed any money by your employer?	
Have you raised a grievance with your employer/ex-employer?	
Date grievance raised?	
If so, what was the grievance about? (brief details or supply copy)	
If so, what was the outcome of your grievance?	
If your grievance was not upheld what were your employers reasons for this?	
Did you appeal the grievance decision?	
Do you have a written employment contract?	
Do you consider yourself to have a disability? If so what is your disability.	
Do you consider yourself to have been discriminated against on any grounds? e.g. Race, Sex, Age, Sexual orientation, religion, pregnancy	
If you have been discriminated on any of the above grounds please provide details of the discriminatory acts (i.e. dates, witnesses, nature of incident).	
Was there a chain of discriminatory acts? i.e. did one incident follow another?	
What was the date of the last discriminatory act?	
Have you suffered from	

bullying/harassment at work? If so, please give brief details.	
Is there any other relevant information?	

ITEMS TO BRING WITH YOU

This section deals with the paperwork which may be relevant to your case.

Please take time when completing this form.

It is essential that you bring along all relevant information to your appointment.

1. A brief chronology of events leading up to the current time/termination of your employment.
2. Last 2 monthly/4 weekly wage slips (the pay details should be consecutive)
3. Your employment contract and/or letter stating your terms and conditions of employment (if any)
4. Your employment handbook (if any)
5. Your employment offer letter
6. All paperwork relating to your dismissal or redundancy (if applicable)
7. All paperwork regarding any grievance you may have raised (if applicable)
8. All correspondence with your employer relating to your disability (if applicable)
9. All correspondence with your employer regarding any claims for discrimination already made
10. All paperwork regarding any claim for unpaid wages
11. All paperwork regarding your efforts to find alternative employment since your dismissal including job applications, rejection letters, offer letters etc. (if applicable)
12. Any other information letters, papers or other correspondence that you think may be important.
13. **This form, completed as much as possible**