



EMPLOYMENT TRIBUNAL

MALE, REPUBLIC OF MALDIVES

APPLICATION FOR APPOINTMENT OF REPRESENTATIVE/LAWYER

APPLICANT'S DETA	AIL	
Full Name (Individual/Officia	al Body/Organization)	
Identity Card/Passport num	nber/company registration i	number:
Permanent Address: Hous	e Name:	Floor, Apartment:
City/Island:	Street:	Country:
REPRESENTATIVE/I	LAWYER'S DETAIL	
Full Name		
Identity Card/Passport num	nber Email	Address:
Mobile number:	Fax number:	Phone number:
Permanent Address: Hous	e Name:	Floor, Apartment:
City/Island:	Street:	Country:
Address to send summon/do	ocuments: House Name:	Floor, Apartment:
City/Island:	Street:	Country:
APPOINTMENT OF	REPRESENTATIVE	
I (claimant/respondent) -	(Name and Address)	appoint this person,
(Name and Address)	to ac	t as my representative in connection with
· · · · · · · · · · · · · · · · · · ·	submitted to Tribunal.	
This person may, enurely	in my place, make any reget information; and rece	equest or give any notice; give or draw out ive any notice in connection with the said

Signature:		Date:
Finger print:		
I,	(Name and Address)	hereby accept the above appointment
Signature:		Date:
Finger print:		
	ENT OF LAWYER	
I (claimant/res	pondent)(Name and Address)	appoint this person, to act as my lawyer in connection with the
claim(s)	e and Address) ——————————————————————————————————	Tribunal.
Signature:		Date:
Finger print:		
Ι,	(Name and Address)	hereby accept the above appointment
Signature:		Date:
Finger print:		

NOTE:

- 1. If a legal entity a letter from that office and if a company, a board of resolution stating the details of appointed representative/lawyer's should be submitted with this form.
- 2. A copy of the Identity Card of the representative/lawyer should be submitted with the form.