



# PAY EQUITY HEARINGS TRIBUNAL

## APPLICATION Pay Equity Act

Form 1

Fields marked with an asterisk (\*) are mandatory.

I am attaching a copy of the Order/Notice of Decision.

(i) Review Services File Number:	20-23826
(ii) Date of the Order or Notice of Decision:	January 14, 2025
(iii) Name of the Review Officer:	Michelle Mendonça

- Review Information Bulletin No. 1 – “Making an Application to the Pay Equity Hearings Tribunal”, the Filing Guide and the Tribunal’s Rules of Practice on acceptable methods of service and filing **before** completing this form to avoid any delay in processing.
- All forms, Notices, the Filing Guide and the Rules of Practice may be obtained from the Tribunal’s website (<http://www.peht.gov.on.ca>).
- To print a paper copy of this form, use **only** the “Print” buttons located within the form.
- Save a copy of your completed form and any attachments as the Tribunal will not return them to you. To save the form at any time, use the “Save” buttons located within the form.
- If there is insufficient space on the form, attach additional pages clearly identifying the relevant section of the form. For e-filing, you may attach files by selecting the “Attach documents electronically” option.

### Part A Contact Information

#### Instructions

- Provide the contact information for each party below. All parties named in the Review Services Order or Notice of Decision must be included. If you wish to add additional parties, use the “Add” button or attach a separate page if completing the form by hand.
- If a party is an organization, provide the name and contact information of an individual who will be able to respond on behalf of that organization. When adding multiple individuals at the same organization, “Add” an additional contact section, repeat the organization name and provide that individual’s contact information (e.g. name, email address, phone number).
- Agents for employee(s) who wish to remain anonymous must complete and attach a **Certificate of Appointment as Agent** (Form 5).

**1 (a). Who is filing this Application?** I am an Employee

If this Application is made on behalf of a group of employees, you must provide contact information for each employee below.

 I am the Agent on behalf of employee(s) who wish to remain anonymous pursuant to subsection 32(4) of the Act. I am a Trade Union/ Bargaining Agent/Employee Association I am an Employer I am the Pay Equity Office**1 (b). Name and Contact information for each Applicant**

If this Application is made on behalf of a group of employees, attach a list of the employees including complete contact information for each employee.

**Applicant 1**Type \*  Organization  Individual

Organization Name \*

Ontario Public Service Employees Union/Syndicat des Employés de la Fonction Publique de l'Ontario, Local 166

First Name Tracy		Last Name More		Position/Title Supervisor/Negotiator	
Full Address (Number, Street, Unit/Apartment, Building Name) 100 Lesmill Road				Other Address Details (e.g. PO Box, R.R. #, c/o)	
City/Town North York		Province/State ON		Country Canada	
Postal/Zip Code M3B 3P8		Telephone Number 437-880-8239		Ext. Fax Number Email Address tmore@opseu.org	

Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

Francesca Berube, Negotiator - fberube@opseu.org

**1 (c). Do you have a legal or other representative?****Contact 1**Contact Person for \*  All Parties above  Party No.(s) \_\_\_\_\_Indicate if this person is a  Lawyer  Paralegal

Organization Name

Ursel, Phillips, Fellows, Hopkinson LLP

First Name Karen		Last Name * Ensslen		Position/Title Lawyer	
Full Address (Number, Street, Unit/Apartment, Building Name) 555 Richmond Street West, Suite 1200				Other Address Details (e.g. PO Box, R.R. #, c/o)	
City/Town Toronto		Province/State ON		Country Canada	
Postal/Zip Code M5V 3B1		Telephone Number 416-969-3518		Ext. Fax Number Email Address kensslen@upflaw.ca	

Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

Christine Hanycz, Legal Assistant - chanycz@upflaw.com

**2 (a). Identify the other parties**

Provide the name of all other parties named in the Review Services Order or Notice of Decision and anyone else whose rights and interests you believe may be affected by this application, along with their contact information.

**Party 1**

Type \*  Organization  Individual

Organization Name \*

Sir Sanford Fleming College of Applied Arts and Technology

First Name Shannon	Last Name Beaudoin	Position/Title Director, Total Rewards
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Full Address (Number, Street, Unit/Apartment, Building Name) 599 Brealey Drive	Other Address Details (e.g. PO Box, R.R. #, c/o)
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City/Town Peterborough	Province/State ON	Country Canada	Postal/Zip Code K9J 7B1
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Telephone Number 705-749-5530	Ext. 1330	Fax Number	Email Address shannon.beaudoin@flemingcollege.ca
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Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

**2 (b). Representative/Contact Person for the Parties Identified Above, if known****Contact 1**

Contact Person for \*  All Parties above  Party No.(s) \_\_\_\_\_

Indicate if this person is a  Lawyer  Paralegal

Organization Name

Hicks Morley Hamilton Stewart Storie LLP

First Name Carolyn	Last Name * Kay	Position/Title Lawyer
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Full Address (Number, Street, Unit/Apartment, Building Name) 77 King St W., 39th Floor, Box 371, TD Centre	Other Address Details (e.g. PO Box, R.R. #, c/o)
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City/Town Toronto	Province/State ON	Country Canada	Postal/Zip Code M5K 1K8
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Telephone Number 416-864-7313	Ext.	Fax Number	Email Address Carolyn-Kay@hicksmorley.com
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Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

Josephine DiStefano, Legal Assistant - josephine-distefano@hicksmorley.com

**Part B Material Facts and Relief Sought****3. Remedy**

Describe what you want the Tribunal to do as a result of this Application. Include all monetary and other redress you seek. If you require more space, attach a separate document.

See attached Schedule "A"

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**4. Statement of Facts – Why should the Tribunal grant the relief you seek?**

Please set out a clear and concise statement of the facts and events upon which you rely. Tell us what happened, who was involved and when it occurred. If you require more space, attach a separate document.

Please note: Except with the Tribunal's permission, you may not rely on any issue, fact, or event not contained in your Application.

See attached Schedule "A"

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**5. Is this an application for Consent to Institute Prosecution?**

Yes  No

**Part C The Hearing**

**6. Where would you prefer the hearing?**

See Important Notes (attached) for information on the Tribunal's Accommodation Policy and how to make a request for accommodation.

The Tribunal may hold hearings in the regional centres set out below. A decision on the location of the hearing will be based on the needs of the Tribunal, the parties, their representatives and the witnesses.

Kingston  London  North Bay  Ottawa  Sarnia  Sault Ste. Marie  Sudbury  Timmins  
 Thunder Bay  Toronto  Windsor

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**7. Do you consent to this matter being heard by a single Presiding Officer or Deputy Presiding Officer? \***

Yes  No

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**8. Do you require French language services?**

Yes  No

If yes, please indicate the nature of services required.

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**9. Please identify any other applications to the Pay Equity Hearings Tribunal related to this application.**

N/A

**10. Attached documents**

Provide a list of the documents you are filing together with this form as instructed below.

Name your documents/attachments so that they are easily identifiable.

If you are e-filing this form, select the "Attach documents electronically" option below and attach each document using the "Add File" button.

If you are filing in a manner other than e-filing, provide the numbered list of documents in the box below.

Note: If your attachments exceed 15MB, you may not e-file. File a paper copy of this form with all attachments using an alternative method permitted by the Tribunal's Rules of Practice.

No.	File	Description	Size (MB)
		Total Size	0
		Total space left over	15
		Number of attachments	0

I have reviewed this form to confirm it is complete \*

Date (yyyy/mm/dd) \*  
2025/03/31

Once this Form and the above-listed documents have been delivered to the other parties, you must complete the Certificate of Delivery (Form 3) and file it with the Tribunal.

## IMPORTANT NOTES

The Tribunal's forms, Notices, Information Bulletins, Rules of Practice and Filing Guide may be obtained from its website <http://www.peht.gov.on.ca> or by calling 416-326-7500 or toll-free at 1-877-339-3335.

### FRENCH OR ENGLISH

Vous avez le droit de communiquer et recevoir des services en français et en anglais. Le Tribunal n'offre pas de services d'interprétation dans les langues autres que le français et l'anglais.

You have the right to communicate and receive services in either English or French. The Tribunal does not provide translation services in languages other than English or French.

### CHANGE OF CONTACT INFORMATION

Notify the Tribunal immediately of any change in your contact information. If you fail to do so, correspondence sent to your last known address (including email) may be deemed to be reasonable notice to you and the case may proceed in your absence.

### ACCESSIBILITY AND ACCOMMODATION

The Tribunal is committed to providing an inclusive and accessible environment in which all members of the public have equitable access to our services. We will aim to meet our obligations under the *Accessibility for Ontarians with Disabilities Act* in a timely manner. Please advise the Tribunal if you require any accommodation to meet your individual needs. The Tribunal's Accessibility Policy can be found on its website.

### COLLECTION AND DISCLOSURE OF INFORMATION AND DOCUMENTS

Any relevant information that you provide to the PEHT must in the normal course be provided to the other parties to the proceeding. Personal information collected on this form and in written or oral submissions may be used and disclosed for the proper administration of the PEHT's governing legislation and case processing. In addition, the *Tribunal Adjudicative Records Act, 2019* requires that the PEHT make adjudicative records (which include applications filed and a listing of such applications) available to the public. The PEHT has the power to make part or all of an adjudicative record confidential. The *Freedom of Information and Protection of Privacy Act* may also address the treatment of personal information. More information is available on the PEHT's website [www.peht.gov.on.ca](http://www.peht.gov.on.ca). If you have any questions concerning the collection of information or disclosure of adjudicative records, contact the Solicitors' Office at the number listed above or in writing to the PEHT, 505 University Ave., 2nd floor, Toronto, ON M5G 2P1.

### E-FILING AND E-MAIL

The Rules of Practice and Filing Guide set out the permitted methods of filing. Forms and submissions may be filed with the Tribunal by a variety of methods including the Tribunal's e-filing system, but not by e-mail. Note that the e-filing system is not encrypted and e-filing is optional. Contact the Client Services Coordinator at the numbers listed above if you have questions regarding e-filing or other filing methods. If you provide an e-mail address with your contact information, the Tribunal will in most cases communicate with you by e-mail from an out-going only generic account. Incoming emails are not permitted.

### HEARINGS AND DECISIONS

Hearings are open to the public unless the Tribunal decides that matters involving public security may be disclosed or if it believes that disclosure of financial or personal matters would be damaging to any of the parties. Hearings are not recorded and no transcripts are produced.

The Tribunal issues written decisions, which may include the name and personal information about persons appearing before it. Decisions are available to the public from a variety of sources including the Ontario Workplace Tribunals Library and [www.canlii.org](http://www.canlii.org). Some summaries and decisions may be found on the Tribunal's website.

## File with the Tribunal

- File the completed form and any attachments using a method permitted by the Tribunal's Rules of Practice.
- Save and Print a copy of your completed form and all attachments as the Tribunal will not return them to you.
- To e-file, click the "Submit" button below. You will receive a confirmation email once the form has been successfully submitted.
- If you choose not to e-file, print this form by clicking on the "Print" button below and then file with the Tribunal together with any attachments.

### For E-Filing only

You must provide a valid email address in order to file this form electronically so that a confirmation email may be sent to you. If you do not have a valid email address, file a paper copy of this form using an alternative method permitted by the Tribunal's Rules of Practice.

Submitted By:

First Name *	Last Name *
Email Address *	Confirm Email Address *

