

Form F59 – Application by an applicant for registration as an organisation to change its name or alter its rules

Fair Work (Registered Organisations) Act 2009, s.25

Fair Work (Registered Organisations) Regulations 2009, reg.27

This is an application to change the name or alter the rules of an association seeking registration as an organisation, lodged with the Fair Work Commission in accordance with s.25 of the *Fair Work (Registered Organisations) Act 2009* and Part 3 of the *Fair Work (Registered Organisations) Regulations 2009*.

The Applicant



These are the details of the association that is seeking registration as an organisation and making an application to change its name or alter its rules.

Name of association	Health Services Union
Commission matter number	



The applicant association is not required to prove that it is registrable before making this application.

How would you prefer us to communicate with you?

Email (you will need to make sure you check your email account regularly)

Post

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

No

Does the Applicant require any special assistance at the hearing or conference (eg a hearing loop)?

Yes – Please specify the assistance required

No

Does the Applicant have a representative?



A representative is a person or organisation who is representing the Applicant. This might be a lawyer or paid agent, a union or employer organization, or a family member or friend. There is no requirement to have a representative.

Yes – Provide representative's details below

No

Applicant's representative



These are the details of the person or organisation who is representing the Applicant (if any).

Name of person	Leigh Svendsen		
Firm, organisation or company	Health Services Union		
Postal address	Suite 46, Level 1, 255 Drummond St		
Suburb	CARLTON		
State or territory	Vic	Postcode	3053
Phone number	0418 538 989	Fax number	
Email address	leighs@hsu.net.au		

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

Yes

No

1. Proposed name change or alteration to rule(s)

1.1 Is the Applicant proposing to change its name?



You may apply to change the name of the association in accordance with s.25 of the RO Act.

Yes – Specify the proposed name for the association.

No

Not applicable

Attach additional pages if necessary.

1.2 If "Yes", why do you wish to change the name of the association? Specify the reason for the change. You may select one of the following from the list:

to comply with the RO Act (including any of the requirements for registration); or

to remove a ground of objection to the registration of the association taken by an objector under the regulations or by the Commission

1.3 Is the Applicant proposing to alter its rules?

You may also apply to alter the rules of the association in accordance with the RO Act (s.25).

Yes – Specify what alteration to the rules is being sought and attach a copy of the proposed text of the altered rule(s)

No

Alteration to rules 43(g) and 75 (b)(i) which are branch rules for the purposes of rule 39(d). The changes to the rules relate only to the New South Wales Branch of the HSU and to the quorum of the NSW Branch Council and Finance Committee. Tracked change version of the text of the proposed variations provided at Appendix D

Amend rulebook 051V dated 8 June 2021 (R2020/207)] as follows:

1. In rule 43(g) delete the word 'eighteen' and replace with the word 'sixteen'
2. In Rule 75(b)(i) remove the word and number 'five (5)' and replace with the word and number 'four (4)'.

Attach additional pages if necessary.

1.4 If “Yes”, why do you wish to alter the rule(s) of the association? Specify the reason for the change. You may select one of the following from the list:

Note: If the association alters its rules, it must within 35 days of doing so, lodge with the Commission two copies of the alterations and a declaration signed by an authorised officer verifying those changes. It must also serve a copy of the alterations on any objector within seven days of lodging copies of the changes with the Commission (RO Regulations, reg. 28).

to comply with the RO Act (including any of the requirements for registration and see further RO Act, s.142 (1) (a));

to remove a ground of objection to the registration of the association taken by an objector under the regulations or by the Commission; or

to correct a formal or technical error in the association's rules (such as, to remove an ambiguity, correct spelling or grammar or an incorrect reference to an organisation or person).

1. The reason for the change to rule 43(g) is to increase the ability to hold quorate meetings without impinging on the oversight by the majority of the members of the branch council.
2. The reason for the change to rule 75(b)(i) is to increase the ability to hold quorate meetings without impinging on the oversight by the finance committee of the branch.

Attach additional pages if necessary.

2. Response to Objector’s contentions

2.1 If the proposed name change or alteration to the rules of the association relates to an objection, provide your response to the contentions made by the Objector.




Using numbered paragraphs, set out your response.

Not applicable

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 or common seal	
Name	Leigh Svendsen
Date	Thursday, 9 September 2021
Capacity/Position	Senior Industrial and Compliance Officer



The application lodged with the Commission must be under the common seal of the organisation or signed by a person authorised to sign it (see RO Regulations, reg. 13). Where this form is being completed and signed by a representative of 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