

PANEL DYFARNU CYMRU ADJUDICATION PANEL FOR WALES

**Notice of Appeal** 

## **Appeal against the Decision of a Standards Committee**

# Section 1 - Information about the member who is appealing the Decision of a Standards Committee

Full Name	
Address (including Postcode)	
Telephone Number	
•	
Email Address	
Section 2 - Representative Det	ails
are you going to be represented (e.g. iny other person)?	by counsel, a solicitor or Yes No
Full Name	
Full Name Profession	
Full Name Profession	
Full Name Profession	
Fyes, please provide details below: Full Name Profession Address (including Postcode)	
Full Name Profession	
Full Name Profession Address (including Postcode)	

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Do you or your representative have any access requirements? (E.g. cannot manage stairs or need wheelchair access). If so, please give details:
You:
Your representative:
Do you or your representative have any other special needs? (E.g. need an interpreter, hearing assistance etc.). If so, please give details:
You:
Your representative:
You may be asked to give evidence on oath or affirmation. Please indicate your preference.
You:
Oath Affirmation
Your representative (if applicable)
Oath Affirmation
Which religious book will you and/or your representative require in order to give evidence under oath?
You:
Your representative: (if applicable)
Please indicate whether you wish the tribunal hearing to be conducted in Welsh or English.
Welsh English

Section 3 - The Tribunal Hearing			
Do you wish for the tribunal to make its adjudication by way of written representations?			
Yes No No			
If the answer is yes, please continue to Section 4			
Are you or your representative planning to attend the tribunal hearing?			
Yes No No			
Are you intending to call any witnesses to support your case?			
Yes No No			
If the answer is yes please provide the information about the witnesses under Section 9 of this form.			
Are there any witnesses (other than those detailed in <b>Section 9</b> ) that you wish the tribunal to call in order that you may ask them questions? If so please give details below.			
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Please note that the tribunal does not have the power to summon the Public Services Ombudsman or a representative of the Ombudsman's office. The Ombudsman or a representative may, however, attend the hearing in order to present the Ombudsman's Report, to explain its contents and to play such part or to assist the tribunal as appropriate.			
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Section 4- Your grounds for making the appeal		
This section is intended to help you set out your grounds for appeal, as required under regulation 10(3) of the Local Government Investigations (Functions of Monitoring Officers and Standards Committees) (Wales) Regulations 2001 (SI 2001 No. 2281). Please note that it will also be considered by the President of the Adjudication Panel for Wales when deciding whether to give permission for your appeal to be heard by the tribunal, together with Sections 5 to 8.		
Do you dispute that you failed to comply with the provisions of the code of conduct as determined by the standards committee?		
Yes No No		
If yes please give your reasons below:		
Do you wish to appeal against the sanction imposed by the standards committee?		
Do you wish to appear against the sanction imposed by the standards committee:		
Yes No No		
If yes please give your reasons below:		
Please use a continuation sheet if necessary and include the section number on each page		

Continuation sheet attached

### **Section 5 - Response**

This section is intended to help you set out your response to the material facts set out in the Public Services Ombudsman for Wales / Monitoring Officer's Report?

Please indicate by reference to numbers in the report, any paragraphs where you dispute the statement made by the Public Services Ombudsman for Wales or the Monitoring Officer and give your reasons and outline the fact as you consider them to be.

Section / paragraph	Your reason(s) for disputing the information provided in that section /	Outline of the facts as you consider them to be.
No.	paragraph.	

Section /	Your reason(s) for disputing the	Outline of the facts as you consider
paragraph	Your reason(s) for disputing the information provided in that section /	Outline of the facts as you consider them to be.
No.	paragraph.	

Section /	Your reason(s) for disputing the information provided in that section /	Outline of the facts as you consider them to be.
paragraph	information provided in that section /	them to be.
No.	paragraph.	
	1	

Section / paragraph No.	Your reason(s) for disputing the information provided in that section / paragraph.	Outline of the facts as you consider them to be.
Please use	a continuation sheet if necessary and inclu	ude the section number on each page
Cont	inuation sheet attached	

## Section 6 - Has there been a failure to follow the provisions of the code of conduct?

The Public Services Ombudsman for Wales / Monitoring Officer has set out in the report reasons why you may be regarded as having breached the provisions of the code of conduct. The tribunal will form its own view on whether there has been such a failure.

Please indicate by reference to the section/paragraph numbers in the report how, if at all, you disagree with the reasoning of the Ombudsman / Monitoring Officer.

Section / paragraph No.	Why I dispute the reasoning of the Public Services Ombudsman for Wales / Monitoring Officer
Please use a	a continuation sheet if necessary and include the section number on each page
Conti	nuation sheet attached

#### **Section 7**

Please set out below (using numbered points) any other reasons (not already covered under **Sections 4 to 6** above) why the tribunal should conclude that there has not been a failure to follow the provisions of the code of conduct.

No.	Other reasons for finding that there has not been a failure to follow the provisions of
	the code of conduct
1.	
2.	
3.	
4.	
5.	
ე.	
6.	
0.	
7.	
8.	
Please us	e a continuation sheet if necessary and include the section number on each page
LL Co	ntinuation sheet attached
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## **Section 8 - Representations**

This section is intended to help you set out your representations to be taken into account if the tribunal finds that you have breached the provisions of the code of conduct

Please set out using numbered points any factors you feel the tribunal should take into account if you are found to have failed to follow the provisions of the code of conduct. Please note that no such finding has yet been made.

No.	Factors for the Appeal tribunal to take into account in deciding upon the appropriate	
	Factors for the Appeal tribunal to take into account in deciding upon the appropriate sanction	
1.		
2.		
3.		
ა.		
4.		
5.		
0.		
Please	use a continuation sheet if necessary and include the section number on each page	
	Continuation sheet attached	
	Continuation sheet attached	
		11

Section 9 - Details of proposed with	esses to be called by the appellant	
Witness 1		
Full Name		
Address (including Postcode)		
Telephone Number		
Email Address		
Please give details of any access requirement access etc.)	its (e.g. cannot manage stairs or need wheelchair	
Please give a detail of any other special need etc.)	ds (e.g. need an interpreter, hearing assistance	
Your witness may be asked to give evidence preference:	on oath or affirmation. Please indicate a	
Oath Affirmation		
If on oath, please confirm which religious book your witness will require in order to give evidence?		
Is the witness going to provide evidence abou	ut a material fact?	
Yes No No		
If yes, please provide an outline of the evidence to be given.		

Is the witness going to provide evidence about action to be taken if the tribunal finds has been a breach of the provisions of the code of conduct?	that there
Yes No No	
If yes, please provide an outline of the evidence to be given.	
Will the witness be giving evidence in Welsh or English?	
Welsh English	
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	1

Witness 2			
Full Name			
Address (including Postcode)			
Telephone Number			
Email Address			
Please give details of any access requirement access etc.)	nts (e.g. cannot manage stairs or need wheelchair		
Please give details of any other special need	(e.g. need an interpreter, hearing assistance etc.)		
Your witness may be asked to give evidence preference:	on oath or affirmation. Please indicate a		
Oath Affirmation			
If on oath, please confirm which religious book your witness will require in order to give evidence?			
Is the witness going to provide evidence about	ut a material fact?		
Yes No No			
If yes, please provide an outline of the evider	nce to be given.		

Is the witness going to provide evidence about action to be taken if the tribunal finds has been a breach of the provisions of the code of conduct?	that there
Yes No	
If yes, please provide an outline of the evidence to be given.	
Will the witness be giving evidence in Welsh or English?	
Welsh English	
	1

Witness 3			
Full Name			
Address (including Postcode)			
Telephone Number			
Email Address			
Please give details of any access requirement access etc.)	nts (e.g. cannot manage stairs or need wheelchair		
Please give details of any other special need	(e.g. need an interpreter, hearing assistance etc.)		
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Oath Affirmation			
If on oath, please confirm which religious book your witness will require in order to give evidence?			
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If yes, please provide an outline of the evider	nce to be given.		

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Yes	No No	
ا Jf yes, إ	ease provide an outline of the evidence to be given.	
Will the	vitness be giving evidence in Welsh or English?	
Welsh	English English	

Section 10 - Statement of Truth				
I believe that th	e facts I have stated in	this document are	e true.	
Full Name				
Date				
Signature				
Or				
I am duly autho	rised by the Applicant	to sign this statem	ent	
I believe (the A	ppellant believes) that	the facts stated in	this document are	true.
Full Name				
Name of Appellant's if applicable	Solicitor/Agents firm,			
Date				
Signature				
Completed forms	should be returne	d to:		

Registrar to the Panel Adjudication Panel for Wales Government Buildings Spa Road East Llandrindod Wells Powys LD1 5HA

Adjudication.panel@wales.gsi.gov.uk E-mail: