

Notice of Participation – Certification to Court – Interested Persons

Revised August 2025

To participate in the section 311 application you must sign and return this completed form to WCAT within 14 days of our invitation letter.
If we do not receive a response from you by this date, the application will proceed without your participation.
When printing this blank document and filling it in by hand, please print clearly using black or blue ink and mail to the address above.

The application before WCAT

Name of Court Action		
Court Registry and Registration #	WCAT Reference No.(s)	Date of Event (YYYY-MM-DD)

Will you be participating in the application?

If you participate, you will receive a copy of submissions and documents concerning this application and relevant claim information. You will be invited to make a written submission or attend an oral hearing if one is held. If you decide not to participate, WCAT will send you only a copy of our final decision on the application.

☐ **Yes, I will participate**

☐ **No, I do not want to participate**

Information about the interested person(s)

If you are filling out this form on behalf of more than one interested person with the same representative, please attach an appendix.

Last Name		First Name	
Your Pronouns	<input type="checkbox"/> They/Them <input type="checkbox"/> She/Her <input type="checkbox"/> He /Him <input type="checkbox"/> Pronouns not listed: _____	Your pronouns and title will help us address you respectfully during the application process.	
Your Title	<input type="checkbox"/> Mx. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Title not listed: _____		
Mailing Address		City/Town	Province
Country		Telephone (Daytime)	Fax Number
Name of business/firm		WorkSafeBC Employer Account #, if known	

Do you need any accommodations to participate in the application process?

An accommodation is an arrangement to help remove a barrier that prevents you from fully participating in the application.

☐ No ☐ Yes, (please explain)

Information about the representative

You may appoint a person or an organization (with or without a specific contact) to represent you, or you may represent yourself. If you are represented, WCAT will correspond with your representative.

Will you be representing yourself?		<input type="checkbox"/> Yes (go to next section)		<input type="checkbox"/> No (complete this section):	
<input type="checkbox"/> I want to appoint an individual without a firm to represent me.	Last name		First name		
<input type="checkbox"/> I want to appoint a firm as my representative.	Name of Firm		Title/Position (if relevant)		
Representative's Pronouns	<input type="checkbox"/> They/Them <input type="checkbox"/> She/Her <input type="checkbox"/> He /Him <input type="checkbox"/> I don't know <input type="checkbox"/> Pronouns not listed: _____	These pronouns and title will help us address your representative respectfully during the application process			
Representative's Title	<input type="checkbox"/> Mx. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> I don't know <input type="checkbox"/> Title not listed: _____				
Mailing Address		City/Town		Province/State	Postal/ZIP Code
Country		Telephone (Daytime)		Telephone (Other)	Fax Number

Notice of Participation –
Certification to Court – Interested Person

WCAT Reference Number _____

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Correspondence information

On applications for Certifications to Court, WCAT corresponds with participant(s), or if they are represented, with their representative(s) by email.

Email address for correspondence with WCAT _____

If you or your representative do not have access to email, check the box

☐ No access to email

Indigenous persons appearing before WCAT

Are you, if you are self-represented, or are any of the parties you represent, an Indigenous person (includes a person of Indigenous ancestry: Inuit, Metis, First Nations, non-status, status, and anyone with First Nations ancestry)?

If you self-identify, you can work with a WCAT Navigator to tell your story. These experienced staff members can offer neutral support and make sure that cultural sensitivities are respected. This service is part of implementing the Truth and Reconciliation Commission's Calls to Action.

☐ Yes, I am ☐ Yes, I represent the following Indigenous person(s): _____

☐ No ☐ Other, please explain: _____ ☐ I choose not to answer this question

Certification and authorization

<input type="checkbox"/>	<p>a) For submitting your application by email: I, _____, understand that checking this box constitutes a legal signature confirming that I acknowledge and agree to the following: I confirm the information on this form is correct and complete. I authorize disclosure of information relating to this Certification to Court application to my representative named above and to the other parties to this application for the purposes of this application and as allowed under section 314 of the <i>Workers Compensation Act</i>.</p> <p>b) For submitting your application by facsimile or Canada Post: the form must be signed. I confirm the information on this form is correct and complete. I will notify WCAT if I change my address or phone number. I understand that WCAT must have my current address to keep my application active. I authorize my representative named above to act on my behalf in this application.</p> <p>Signature _____ Date Signed: (YYYY-MM-DD) _____</p> <p>X</p>
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Personal information on this form is collected for the processing and adjudication of a WCAT matter under the *Workers Compensation Act* and the *Freedom of Information and Protection of Privacy Act*. For further privacy information, please contact WCAT's Freedom of Information Coordinator at the address or telephone number on the top of this form. Email is not a secure medium. Any message or attachment you send by email could be intercepted and read by someone else, and you accept the risk of access to personal information by unauthorized persons during transmission. WCAT accepts no responsibility for messages or attachments sent by email until they are received by WCAT. You are responsible for the security of information you are sending. You must assess its sensitivity and decide whether email is a secure enough method of communication.