

Form 90.07A

20

C.A. No.

Nova Scotia Court of Appeal

Between:

[name]

Appellant

and

[name]

Respondent

**Notice of Application for Leave to Appeal
(Workers' Compensation)**

To: [name and address of each respondent]

Appellant applies for leave to appeal

The appellant applies for leave to appeal pursuant to s. 256 of the *Workers' Compensation Act* from a decision of the Nova Scotia Workers' Compensation Appeals Tribunal dated _____, 20____, [state whether the whole or only part, and if so which part, of the order or decision is being appealed from] .

Grounds of appeal

If leave to appeal is granted, the grounds of appeal will be

- (1) [state grounds completely and concisely and include list of legislation relied on]
- (2)
- (3)

Motion for date and directions

The application for leave will be heard on a time and date to be set by a judge of the Court of Appeal. The appellant must, not more than eighty days after the date this notice is filed, make a motion to a judge of the Court of Appeal to set that time and date and give directions. You will be notified of the motion.

Contact information

The appellant designates the following address:

Documents delivered to this address will be considered received by the appellant on delivery. Further contact information is available to each party through the prothonotary.

Signature

Signed _____, 20____

Signature of appellant

Print name:

OR

Signature of counsel

[name] as counsel

for [name]

Registrar’s Certificate

I certify that this notice of application for leave to appeal was filed with the court on _____, 20____.

[attach copy decision appealed from]