To - The Employee Relations Manager

**RE: Claim of Insufficient Guaranteed Hours**

I wish to submit a disadvantage claim based on insufficient guaranteed hours been provided for the period……………… to ……………………….

Based on my calculations, I should have received an offer of ………………. guaranteed hours per fortnight.

In support of this claim I provide the following information:

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Employee name: …………………………………………………….

Employee Number: ………………………………………………….

Region: ……………………………………………………………………

Contact email address: ……………………………………………

Contact Phone number: ………………………………………….

Date: …………………………..