



### **Who can withdraw an Application?**

An applicant may request to withdraw his or her Application at any time after an Application has been filed with the Human Rights Tribunal by completing this Request to Withdraw an Application (Form 9).

Where an Application was filed on behalf of another person under section 34(5) of the *Code*, Form 9 must include the person's signed consent.

### **When can you withdraw an Application?**

If you request to withdraw your Application before the respondent has filed a Response, the file will be closed.

If you Request to Withdraw your Application after a respondent has filed a Response, an Application may be withdrawn only with the permission of the Tribunal and upon such terms as the Tribunal may determine.

### **Follow these steps to make your Request:**

1. Fill out this Form 9.
2. If the Tribunal has not sent you a Response (Form 2) to your Application you are only required to file a completed Form 9 with the Tribunal.
3. If the Tribunal has sent you a Response, you must deliver a copy of Form 9 to all other parties and any trade union or occupational or professional organization identified in the Application and any other person or organization identified as an affected person.
4. Complete a Statement of Delivery (Form 23) if you delivered the Form 9 to the other parties and affected persons.
5. File Form 9 and, where necessary, Form 23 with the Tribunal.

**Information for all parties and other persons or organizations who receive a copy of this Request:**

The applicant has made a Request to Withdraw their Application.

You may respond to this Request to Withdraw by completing a Response to a Request for an Order During Proceedings (Form 11).

**Follow these steps to respond to the Request to Withdraw:**

1. Fill out Form 11.
2. Deliver a copy of Form 11 to all parties and any other person or organization that received a copy of the Request to Withdraw.
3. Complete a Statement of Delivery (Form 23).
4. File Form 11 and Form 23 with the Tribunal.

**If you are filing a Response to the Request to Withdraw, you must file it not later than two (2) days after the Request to Withdraw was delivered to you.**

Download forms from the Tribunal's web site  
accessible format, contact us:

If you need a paper copy or

Human Rights Tribunal of Ontario  
15 Grosvenor Street, Ground Floor  
Toronto, ON M7A 2G6

Phone: 416-326-1312 Toll-free: 1-866-598-0322

TTY: 416-326-2027 Toll-free: 1-866-607-1240

Email:



**Application Information**

Tribunal File Number:	
Name of Applicant:	
Name of Each Respondent:	

**1. Your Contact Information**

First (or Given) Name		Last (or Family) Name		Organization (if applicable)	
Street Number	Street Name			Apt/Suite	
City/Town		Province	Postal Code	Email	
Daytime Phone	Cell Phone		Fax	TTY	

If you are filing this as the Representative (e.g. lawyer) of one of the parties please indicate:  
 Name of party you act for and are filing this on behalf of: \_\_\_\_\_ LSUC No. (if applicable) \_\_\_\_\_

What is the best way to send information to you?  Mail  Email  Fax  
 (If you check email, you are consenting to the delivery of documents by email.)

I am (or I am filing on behalf of) the:  
 Applicant  Respondent  Ontario Human Rights Commission  
 Other - describe: \_\_\_\_\_

**2. Are you applying to withdraw the Application against all of the Respondents?**

Yes  No

**3. If no, against which Respondent(s) do you want to withdraw your Application?**

#### 4. Signature

By signing my name, I declare that, to the best of my knowledge, the information that is found in this form is complete and accurate.

Name:

Signature:

Date: (dd/mm/yyyy)

- Please check this box if you are filing your request electronically. This represents your signature. You must fill in the date, above.

#### Collection of Information:

Under the Ontario *Human Rights Code*, the Human Rights Tribunal of Ontario (HRTO) has the right to collect the personal information requested on this form. We use the information to resolve your application. After you file the form, your information may also be available to the public. If you have questions about how the HRTO uses your personal information, contact the HRTO at 416-326-1312 or 1-866-598-0322 (toll-free.)



Complete this form to give consent to another person or organization to Request to Withdraw an Application that was filed with the Human Rights Tribunal of Ontario on your behalf. This consent form must be filed together with the Request to Withdraw.

Application Information	
Tribunal File Number:	
Name of Applicant:	
Name of Each Respondent:	

Your Information					
First (or Given) Name		Last (or Family) Name		Organization (if applicable)	
Street Number	Street Name			Apt/Suite	
City/Town		Province	Postal Code	Email	
Daytime Phone	Cell Phone		Fax	TTY	

I, \_\_\_\_\_ give my consent to \_\_\_\_\_  
to withdraw the Application (Tribunal File No. \_\_\_\_\_ ) filed on my behalf.

Signature	
By signing my name, I declare that, to the best of my knowledge, the information that is found in this form is complete and accurate.	
Name:	
Signature:	Date: (dd/mm/yyyy)

Please check this box if you are filing your response electronically. This represents your signature. You must fill in the date, above.

Collection of Information:

Under the Ontario *Human Rights Code*, the Human Rights Tribunal of Ontario (HRTO) has the right to collect the personal information requested on this form. We use the information to resolve your application. After you file the form, your information may also be available to the public. If you have questions about how the HRTO uses your personal information, contact the HRTO at 416-326-1312 or 1-866-598-0322 (toll-free.)