

\_\_\_\_\_  
(Petitioner's name)

\_\_\_\_\_  
DISTRICT COURT  
(Number or Name of Judicial District Court)

VS.

PARISH OF \_\_\_\_\_  
(Name of court's parish)

EXECUTIVE DIRECTOR,  
LOUISIANA WORKFORCE  
COMMISSION, AND

STATE OF LOUISIANA

DOCKET NO.

\_\_\_\_\_  
(Employer Name if any listed on  
Board of Review decision)

SEC./DIV.

**PETITION FOR JUDICIAL REVIEW OF AGENCY DECISION**  
**DENYING UNEMPLOYMENT INSURANCE RIGHT OR BENEFITS**

1.

Petitioner, \_\_\_\_\_ (full name), asks this court under La. R.S. 23:1634 to review a decision of the Louisiana Workforce Commission's Board of Review.

2.

This court is the correct place to file this lawsuit because Petitioner lives in the parish where this court is located.

3.

The Board of Review decision Petitioner asks the court to review was mailed on this date:

\_\_\_\_\_ and has this Docket Number: \_\_\_\_\_  
(Docket number with "BR" in middle).

4.

The current Executive Director of the Louisiana Workforce Commission is sued in his or her official capacity as the head of the agency that runs the Unemployment Insurance program.

5.

If the Board of Review decision has an employer's name on it, that employer named above is either a Louisiana corporation or doing business in the State of Louisiana.

6.

Petitioner asks this court to review the Board of Review decision because it is:

- (a) in violation of constitutional provisions;
- (b) in excess of the statutory authority and jurisdiction of the Board of Review;
- (c) made upon unlawful procedures;

- (d) affected by other errors of law;
- (e) clearly erroneous in view of the entire record as submitted and the public policy contained in the act of the legislature authorizing the decision; and/or
- (f) not supported by facts established by sufficient, competent evidence.

**WHEREFORE**, petitioner asks this court, after reviewing the agency record and any arguments submitted by the parties:

- (1) To reverse the decision of the Board of Review;
- (2) To order any other appropriate relief.

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Street Address or P.O. Box

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Telephone Number

**PLEASE SERVE:**

Defendant Executive Director (Two Copies)  
Louisiana Workforce Commission  
1001 North 23rd Street  
Baton Rouge, LA 70804

(By law, R.S. 23:1634, s/he must  
serve the other defendant if any)

**PETITIONER CANNOT BE CHARGED FILING & SERVICE FEES**  
because petitioner is an Unemployment Claimant.

By law, the court must accept this petition for filing without charging Petitioner any filing fees, service charges, or other costs or fees. Petitioner is exempt from costs and fees as stated in La. R.S. 23:1692.

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Acadiana Legal Services (800) 256-1175 ([www.la-law.org](http://www.la-law.org))  
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