

**Form C-A (for Agency Cases)**

**UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT**

APPLICATION FOR ENFORCEMENT

PETITION FOR REVIEW

**PRE-ARGUMENT STATEMENT**

SEE NOTICE ON REVERSE. PLEASE TYPE OR PRINT. ATTACH ADDITIONAL PAGES IF NECESSARY.

NAME OF AGENCY: \_\_\_\_\_

AGENCY DOCKET NO.: \_\_\_\_\_

TITLE IN FULL: \_\_\_\_\_

ORDER NUMBER: \_\_\_\_\_  
APPROXIMATE NO. OF PAGES IN RECORD: \_\_\_\_\_  
JURISDICTION OF COURT OF APPEALS: \_\_\_\_\_

DATE ENTERED: \_\_\_\_\_  
NO. OF EXHIBITS: \_\_\_\_\_  
USCA \_\_\_\_\_

HAS THIS MATTER BEEN BEFORE THIS COURT PREVIOUSLY?  Yes  No IF YES, STATE:

CASE NAME: \_\_\_\_\_ CITATION: \_\_\_\_\_ DOCKET NO.: \_\_\_\_\_

ATTORNEY(S) FOR PETITIONER(S): \_\_\_\_\_  
NAME

ADDRESS TELEPHONE

ATTORNEYS FOR RESPONDENT(S): \_\_\_\_\_  
NAME

ADDRESS TELEPHONE

APPEAL TAKEN:  AS OF RIGHT  BY DISCRETION (SPECIFY STATUTES UNDER WHICH APPEAL IS TAKEN): \_\_\_\_\_ USCA \_\_\_\_\_

PETITIONER/APPLICANT IS  AGENCY  OTHER PARTY  NON-PARTY. SPECIFY STANDING: \_\_\_\_\_

FACTS UPON WHICH VENUE IS BASED: \_\_\_\_\_

NATURE OF ORDER ON WHICH REVIEW OR ENFORCEMENT IS SOUGHT:

- ADMINISTRATIVE REGULATION/RULEMAKING
- BENEFITS REVIEW
- UNFAIR LABOR PRACTICE:
- ROUTES:
  - \_\_\_\_\_ HEALTH & SAFETY
  - \_\_\_\_\_ EMPLOYER
  - \_\_\_\_\_ COMMUNICATIONS
  - \_\_\_\_\_ IMMIGRATION
  - \_\_\_\_\_ COMMERCE
  - \_\_\_\_\_ TARIFFS
  - \_\_\_\_\_ OTHER: (SPECIFY) \_\_\_\_\_

CONCISE DESCRIPTION OF PROCEEDINGS BELOW AND ORDER TO BE REVIEWED OR ENFORCED (NOTE THOSE PARTS OF THE ORDER FROM WHICH RELIEF IS SOUGHT):

ISSUES PROPOSED TO BE RAISE ON PETITION OR APPLICATION: \_\_\_\_\_  
RELIEF SOUGHT: \_\_\_\_\_

TO YOUR KNOWLEDGE, IS THERE ANY CASE NOW PENDING OR ABOUT TO BE BROUGHT BEFORE THIS COURT OR ANY OTHER COURT OR ADMINISTRATIVE AGENCY WHICH:

- (A) ARISES FROM SUBSTANTIALLY THE SAME CASE OR CONTROVERSY AS THIS APPEAL?  YES  NO
- (B) INVOLVES AN ISSUE SUBSTANTIALLY THE SAME, SIMILAR, OR RELATED TO AN ISSUE IN THIS APPEAL?  YES  NO  
(IF YES, STATE WHETHER "A" OR "B" OR BOTH AND PROVIDE:

DOCKET: \_\_\_\_\_ CASE NAME: \_\_\_\_\_

COURT OR AGENCY: \_\_\_\_\_ CITATION: \_\_\_\_\_ NUMBER: \_\_\_\_\_

FOR PETITIONER OR APPLICANT:

(PRINT) NAME OF PETITIONER NAME OF COUNSEL OF RECORD TELEPHONE

DATE

SIGNATURE OF COUNSEL OF RECORD