

## IL Workers' Compensation

| Form Number     | Form Name   |
|-----------------|---|
| IC1             | Application for Adjustment of Claim                               |
| IC4             | Notice of Motion and Order  |
| IC5             | Settlement Contract Lump Sum Petition/Order                       |
| IC6             | Appearance of Representative                                      |
| IC7             | Petition for Immediate Hearing Under Sec 19(b)                    |
| IC8             | Response to Petition for Immediate Hearing                        |
| IC9             | Request for Hearing   |
| IC10            | Attorney Representation Agreement                                 |
| IC11            | Petition for Review of Arbitration Decision                       |
| IC11a           | Petition for Review of Arbitration Decision/Sec 19(b-1)           |
| IC14            | Petition for Review Under Sec 19(h)/8(a)                          |
| IC14a           | Petition for Immediate Hearing Under Sec 19(b-1)                  |
| IC14b           | Response to Petition for Immediate Hearing Sec 19(b-1)            |
| IC14d           | Order to Dismiss/Withdraw Petition Under Sec 19(b-1)              |
| IC15            | Proof of Service  |
| IC16            | Subpoena  |
| IC17            | Motion to Voluntarily Dismiss                                     |
| IC19            | Order to Dismiss Case for Want of Prosecution                     |
| IC23            | Petition to Reinstate Case  |
| IC26            | Notice of Change of Address                                       |
| IC27            | Motion to Dismiss Attorney of Record                              |
| IC28            | Motion to Withdraw as Attorney of Record                          |
| IC29            | Stipulation to Substitute Attorneys                               |
| IC31            | Rehabilitation Plan   |
| IC32            | Notice of Rejection of Settlement Contract                        |
| IC33            | Dedimus Potestatum  |
| IC34d           | Decision (short form – appealable)                                |
| IC34o           | Order (short form – interlocutory)                                |
| IC34s           | Order Removing Settled Case from Call                             |
| IC36            | Request for Voluntary Arbitration                                 |
| IC41            | Arbitration Info Sheet  |
| IC42            | Request for Investigation Into Employer's Insurance Coverage      |
| IC43            | Request to Certify Lack of Insurance Coverage                     |
| IC44            | Injured Workers' Benefit Fund: Request for Benefits and Affidavit |
| IC45            | Employer's First Report   |
| IC85            | Employer's Supplementary Report of Injury                         |
| ICArbDec        | Arbitration Decision  |
| ICArbDec19(b)   | 19(b)Arbitration Decision   |
| ICArbDec19(b-1) | 19(b-1)Arbitration Decision                                       |
| ICArbDecFatal   | Arbitration Decision Fatal  |
| ICArbDecN&E     | Arbitration Decision Nature & Extent Only                         |
| ICPN            | Notice to Employees from the State of IL                          |
| ICTR            | Transcript Receipt Form   |