



Re: Form

From Casemanagement <casemanagement@inslaw.co.uk>

Date Tue 7/14/2026 3:21 PM

To p.keith07 <p.keith07@btinternet.com>

Hi Patricia,

Thank you for getting back to me. I hope you are keeping well.

Please find below the form containing the information we require. There is no rush, so please complete it in your own time whenever you feel comfortable.

When you reply, would you mind including the question number before each of your answers? This will help me make sure everything is entered accurately into the system and reduce the risk of any errors.

If you have any questions while completing the form, please don't hesitate to get in touch.

We also have a WhatsApp number if that is more convenient for you. Unfortunately, we're unable to reply to WhatsApp messages at the moment, but I can still receive and read them. If you do contact us via WhatsApp, I'll respond to you by email instead. I do apologise for any inconvenience this may cause.

Please find the form below:

Section 1

Personal Details

1. Full Name:
2. Have you ever been known by any other names:
If so, Previous Name: First Name/Last Name
3. Date of Birth:
4. Email Address:
5. Contact Number:
6. Current Address:
7. Current GP Practice:

Section 2

Family Information

10. Mother's Full Name (including maiden):
11. Father's Full Name:
12. Any other guardian names:
If so, Full name and relation
13. Address immediately before entering care:
If unknown, general area or council
14. GP immediately before entering care:
If unknown, general area or council

Section 3**Beneficiary Details**

14. Would you like to nominate a beneficiary:

If so:

15. Beneficiary DOB:

16. Beneficiary Address:

17. Beneficiary Contact Number:

Mobile:

Landline:

18. Beneficiary Email Address:

Section 4**Terminal Illness (if applicable)**

19. Do you have a terminal illness:

20. Details of terminal illness (if applicable):

21. Do you have medical evidence confirming this (if applicable):

22. Please briefly describe what evidence you have (if applicable):

Section 5**Criminal Convictions (if applicable)**

23. Have you ever been convicted of murder, rape, or received a prison sentence of five years or more or a relevant violent or sexual offence?

24. Please provide details of your conviction (if applicable):

25. Do you have any other criminal convictions (if applicable):

26. Please provide details of your conviction (if applicable):

Section 6**Previous Awards (if applicable)**

27. Have you previous received any of the following awards relation to the abuse you experienced, e.g. below

Criminal Injuries Compensation Authority (CICA):

Court Awarded Damages:

Out of Court Settlement:

Scottish Redress Advance Payment Scheme:

28. If so, please provide any details you recall about the award, including the date received and the amount received:

When did you receive the payment (approximately):

How much did you receive (approximately):

Section 7**Care History**

29. How many Care Settings were you placed in during prior to turning 18 years of age and before 1st December 2004:

30. For Each Care Setting

Name of Care Setting

Approximate Dates (e.g. 1989-1990):

Length of Stay:

Council or Local Authority:

Any other Councils or Social Services Involved:

Section 8**Additional Information**

31. Is there anything else you want us to know that may help with your application:

Take care,
Francesca
INS Law

From: p.keith07 <p.keith07@btinternet.com>
Sent: Monday, July 13, 2026 11:38 AM
To: Casemanagement <casemanagement@inslaw.co.uk>
Subject: Form

Good morning, I will fill in a form. Please note I am a very private person and I have not informed my family about my time in children's homes. I can email all the details to you. Regards Patricia Keith.