

Scotland's Redress Scheme

Application form **Part 2**

Additional statement pages

Name

John Collins

Date of birth

Day 19

Month 10

Year 1973

Your statement for additional care settings

In Part 1, you will have already provided information about the care settings you were abused in. By providing this information here, your case worker can join together the name of the care setting with your statement of abuse.

Q1 | What is the name or location of the relevant care setting you were abused in?

(For example, the name of the care home, or the city or region where you lived in foster care or while boarded out).

Catherine Mary Home

Do not worry if you are uncertain about dates or time. Please provide your best estimate.

Q2 | When were you abused?

For example: a single date, an age, or an approximate time or time range.

1976

You do not have to provide names, if you cannot remember or do not feel comfortable doing so. If you do provide a name it will be passed to Police Scotland.

Q3 | Who was involved in your abuse?

For example: a member of staff, a peer or someone outside the care setting.

The information you provide will be used by Redress Scotland to make a decision about your application. Redress Scotland will use the "Assessment framework" to help them do this, available on [gov.scot](https://www.gov.scot). Please be aware that it contains graphic descriptions of abuse.

Q4 | On the next page, please provide as much information as you can about:

- the abuse you experienced while living in this care setting
- what life was like for you during this time
- how the people responsible for your care and welfare failed to carry out that duty (within or beyond your care setting)

You can continue on additional pages if you need to.

Part 2 of the application form provides more information about what you may want to include.

Your statement for additional care settings

I was subjected to mental and physical abuse as a form of punishment. This included being forced to stand in a corner for long periods of time and not being allowed to do anything. If I moved, I would be punished by being hit with a belt or a cane. These experiences have had a lasting impact on my mental health. I now suffer from depression, anxiety and PTSD. At times, I can go for long periods appearing to cope and function normally. However, something can suddenly trigger the trauma and cause me to have a severe emotional meltdown. When this happens, the effects are not short-lived and can continue for months. The trauma I experienced continues to affect my thoughts, emotions and relationships. My current relationship has broken down as a result of the impact this trauma has had on me and because of the thoughts and emotions I continue to struggle with internally.

Although I may sometimes appear to be coping well, this does not mean that the effects of what happened to me have gone away. The trauma continues to have a significant and ongoing impact on my mental health, my ability to cope with certain situations, and my personal relationships.

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SHA-256 Document Hash	d840f5a419999aa75c96b000df4eef65b8740c3c5f7b2220153e4cf194d75166
Recipient Name	Miss John Joseph Collins
Recipient Email	joncollins1973@gmail.com
Signing Timestamp (UTC)	2026-08-24 15:25:12
IP Address	217.43.221.53
Browser	Chrome on Android

Signing Consent & Review

Document opened	2026-08-21 09:39:50 UTC
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Document created	2026-08-21 09:37:49	45.145.101.64	Unknown browser
Document sent to recipient	2026-08-21 09:38:04	45.145.101.64	Unknown browser
Document opened by recipient	2026-08-21 09:39:50	66.249.81.169	Chrome
Document opened by recipient	2026-08-24 13:24:42	217.43.221.53	Chrome
Document opened by recipient	2026-08-24 15:20:11	217.43.221.53	Chrome
Document opened by recipient	2026-08-24 15:20:30	217.43.221.53	Chrome
Document opened by recipient	2026-08-24 15:22:50	217.43.221.53	Chrome
Document reviewed (scrolled through)	2026-08-24 15:25:07	217.43.221.53	Chrome
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Document signed	2026-08-24 15:25:12	217.43.221.53	Chrome

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