



Scottish Criminal Cases
Review Commission

Application Form for Review of Conviction or Sentence or Both

The Scottish Criminal Cases Review Commission is responsible for investigating alleged miscarriages of justice in Scotland. We investigate convictions and sentences imposed by criminal courts in Scotland. We cannot deal with civil or military cases.

We have the power to refer a case to the High Court of Justiciary if we believe:

- there may have been a miscarriage of justice; and
- it is in the interests of justice to do so.

If we refer a case, the High Court decides whether to overturn the conviction or sentence.

! Please send your completed form and any supporting documents to:

Scottish Criminal Cases Review Commission
5th Floor
Portland House
17 Renfield Street
Glasgow G2 5AH

Tel: 0141 270 7030 Email: info@sccrc.org.uk
Fax: 0141 270 7040 Website: www.sccrc.org.uk

If you need any help to complete this form, please ask us.

If English is not your main language we can provide help with this form. The Commission is a Member of the Happy to Translate initiative.



Guidance and information notes

Please complete as many parts of the form as you can. Please read and consider the following before completing the form:

- Do you believe you have suffered a miscarriage of justice? If so, does this relate to a criminal conviction in Scotland or a sentence imposed as a result of such a conviction?
 - We will normally accept your application for a full review only if you appealed to the High Court. If you did not appeal against your conviction or sentence, we will not accept your application for a full review unless you can show that there are exceptional circumstances why we should do so.
 - You may ask a solicitor (or another person) to help you complete the form, but you do not need to use a solicitor to apply to us.
 - If you do use a solicitor, you may be entitled to free or low-cost legal advice under the Legal Advice and Assistance Scheme. Your solicitor should be able to help you set out your 'grounds of review' (the reasons you want a review).
 - After we have received your form we will need to obtain and keep some personal information about you to enable us to review your case. We will disclose your personal information only in accordance with our disclosure policy. Our disclosure policy is available at www.sccrc.org.uk or by writing to us at the above address.
 - Where we decide to refer your case to the High Court, we will issue a news release saying that we have referred your case. However, we will remove your name in certain circumstances, as set out in our disclosure policy.
- There is more information about us and how we review cases in the information booklet we supply with this form. If you do not have a copy of this booklet, please let us know and we will send you one.

Part 1: Personal information

1 First names:

2 Surname:

! If you have been known by a different name or names, please answer questions 3 and 4.

3 By what first names were you known?

4 By what surnames were you known?

5 Date of birth: (dd/mm/yyyy)

6 Male

Female

(please tick)

7 If you are in prison, what is the name of the prison?

8 Prisoner number:

9 Earliest date of release: (dd/mm/yyyy)

10 Parole qualifying date: (dd/mm/yyyy)

11 Home address

12 Contact telephone number:

! It is important to let us know about any changes of address. If you are released from prison when we are reviewing your case, you must tell us your new address.

Part 2: Details of representatives

13 The name and address of the solicitor who is helping you with this application (if any):

14 The name and address of anyone else who is helping you with your application:

15 The name and address of your solicitor at the trial:

16 The name and address of your solicitor at the appeal:

17 The name and address of the solicitor who has your defence papers:

18 How did you hear about the Commission?

Part 3:

Conviction and sentence

In the boxes below, please provide details of the following:

- all the charges on the indictment or complaint against you, including any charges which did not result in a conviction;
- details of the sentence imposed on you - for example, any prison sentence, community payback order or fine.
- confirmation of whether you pled guilty or not;
- confirmation of whether you were convicted of the charge after trial or not; and
- confirmation of whether you want us to review your conviction, sentence or both.

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1	<p>What was the first charge? (for example murder, robbery, misuse of drugs)</p>	<p>Did you plead guilty? (please tick yes or no)</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p>Were you convicted of this charge after trial? (please tick yes or no)</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
	<p>What was the sentence for this charge?</p>	<p>Would you like your conviction reviewed? (please tick yes or no)</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p>Would you like your sentence reviewed? (please tick yes or no)</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>

2	What was the second charge? (for example murder, robbery, misuse of drugs)	Did you plead guilty? (yes/no)	Were you convicted of this charge after trial? (yes/no)
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	What was the sentence for this charge?	Would you like your conviction reviewed? (yes/no)	Would you like your sentence reviewed? (yes/no)
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

3	What was the third charge? (for example murder, robbery, misuse of drugs)	Did you plead guilty? (yes/no)	Were you convicted of this charge after trial? (yes/no)
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	What was the sentence for this charge?	Would you like your conviction reviewed? (yes/no)	Would you like your sentence reviewed? (yes/no)
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

4	What was the fourth charge? (for example murder, robbery, misuse of drugs)	Did you plead guilty? (yes/no)	Were you convicted of this charge after trial? (yes/no)
What was the sentence for this charge?		Would you like your conviction reviewed? (yes/no)	Would you like your sentence reviewed? (yes/no)
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

5	What was the fifth charge? (for example murder, robbery, misuse of drugs)	Did you plead guilty? (yes/no)	Were you convicted of this charge after trial? (yes/no)
What was the sentence for this charge?		Would you like your conviction reviewed? (yes/no)	Would you like your sentence reviewed? (yes/no)
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Sentence

31 Please explain why you believe you have suffered a miscarriage of justice in relation to your sentence (please continue on a separate sheet of paper, if needed).

A large rectangular area with rounded corners, containing horizontal dotted lines for writing.

Please continue on a separate sheet of paper, if needed.

Part 9: Data protection

'I want the Scottish Criminal Cases Review Commission to review my case. I understand that to do so the Commission will need to obtain, to record and to hold information about my case. I also understand that the Commission will disclose information about my case only in accordance with its disclosure policy. I give the Scottish Criminal Cases Review Commission my consent to do so.'

Sign:

Date:

Part 10: Permission to your legal representatives

To investigate your case fully, we may need to obtain information about your case from:

- the solicitor(s) who represented you at the trial and the appeal;
- any advocate(s) who represented you at the trial and the appeal; and
- any other solicitor or advocate who represented you at any other stage in your case, including your current solicitor.

The information we need may include:

- information about how your case was prepared and presented at the trial and the appeal; and
- details of confidential discussions you had with your solicitor or advocate (or both) at the trial stage, the appeal stage or after the appeal.

! We may decide not to investigate your case unless you give us your permission for these representatives to disclose this information to us.

If you wish to give permission for these representatives to give us this information, please sign below.

By signing below, you are giving permission to your previous and current legal representatives to disclose to us the information we ask for. You may want to get legal advice before you sign.

Sign:

Date:

Part 11: Equal opportunities monitoring

The Scottish Criminal Cases Review Commission wishes to ensure equality in all its policies and procedures. We ask all applicants to complete the following part of the application form.

We will treat your answers in the strictest confidence and will use the information you give only to help us check whether our policies and procedures meet the needs of all our applicants and to help us improve our service.

Gender

Male

Female

Ethnic background

Please tick which of the following best describes your ethnic background:

White

British

English

Irish

Scottish

Welsh

Any other: (Please specify)

Black, black Scottish or black British

Caribbean

African

Any other: (Please specify)

Asian, Asian Scottish or Asian British

Indian

Pakistan

Bangladeshi

Chinese

Any other: (Please specify)

(continued over)

Mixed: (Please specify)

Other ethnic background: (Please specify)



HAPPY TO TRANSLATE

Is English your main language?

Yes

No

If not, what is?

If English is not your main language do you require any language assistance?

Yes

No

Disability

Do you consider you have a disability?

Yes

No

If yes, please provide details:



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