

The Vale of Leven Hospital Inquiry

APPLICATION FOR FUNDING FOR LEGAL REPRESENTATION OTHER THAN AS A CORE PARTICIPANT

You should use this form to apply for funding for legal representation. The address you give will be used as your designated address for service of any documents.

If you are a Core Participant, or wish to be designated a Core Participant, do not use this form to apply for funding. You can find the application form for Core Participants on the Inquiry website www.valeoflevenhospitalinquiry.org.

All applicants must complete **PARTS I to V** of this form.

When you fill in this form, you will need to look at the Guidance on awards. You will find details there about the type of information the Chairman will need in order to come to a decision about your application. This Form, the Guidance, the Determination by the Scottish Ministers and information about the Inquiry are on the Inquiry website www.valeoflevenhospitalinquiry.org.

When complete, please send the form
by email to information@valeoflevenhospitalinquiry.org
by post to The Vale of Leven Hospital Inquiry
3rd Floor, Lothian Chambers
59-63 George IV Bridge
Edinburgh
EH1 1RN

PLEASE USE BLOCK CAPITALS

PART I

ABOUT YOU

(a) Your details

1. Your Name :

2. Your Designated Address for service (Including postcode) :

3. Your telephone number

Daytime

:

Evening

:

4. E-mail (if available)

:

(b) Your interest in the Inquiry

If you have been asked by the Inquiry team to attend the hearings to give evidence as a witness or to produce documents or anything else, indicate that here.

If you have not been so asked by the Inquiry team, explain here the nature of your interest in the Inquiry. You will only be eligible for a possible award of funding where, in the opinion of the Chairman, you have such a particular interest in the proceedings or outcome of the Inquiry as justifies an award.

PART II

YOUR RECOGNISED LEGAL REPRESENTATIVE

Please provide details of the lawyer you have appointed to represent you, as follows:-

Lawyer's Name :

Business Address :

Business telephone numbers :

E-mail address :

PART III

PUBLIC FUNDING

Please provide details of the following:

- a. Why you need **legal representation** in relation to the Inquiry.

- b. Your current employment details.

- c. Why it is in the public interest for you to receive public funding for representation.

PART IV

EXTENT OF LEGAL REPRESENTATION

In terms of rule 17(2) of the 2007 Rules an applicant for funding must provide details of the extent of the legal representation sought. Please provide details of the following:-

1. The type of work your lawyer will do in representing you.

2. Information about your proposed legal team

3. Proposed hourly rates (see the Scottish Ministers' Determination of September 2009 for the maximum permissible hourly rates).

4. Time to be spent on Inquiry work by your legal team (see the Scottish Ministers' Determination of September 2009 for the maximum number of chargeable hours per week).

5. Any other expenses relating to legal representation

PART V

DECLARATION

I certify that the information given in this application form is to the best of my belief and knowledge true and correct.

Your signature

Date