

Scotland's Redress Scheme

Application form **Part 2**

Additional statement pages

Name

Garry Mackinnon

Date of birth

Day 06

Month 12

Year 1979

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).

Foster Care

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.

1987 - 1989

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

While I was living with my foster carer, I was regularly bullied, intimidated and physically hit by them. I felt frightened in the placement and felt that they made everyday life very difficult for me. I remember feeling that I could not escape the bullying and intimidation because this was the place where I was supposed to be cared for.

My father died in 1989. After attending his funeral, I was moved from that foster placement and placed with different foster parents. This was an extremely difficult period in my life, as I was dealing with the death of my father as well as another change in where I was living and who was caring for me.

Certificate of Authenticity

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Certificate ID	01M0SM1K0XA4YZATY6VYKFSPT7
Document ID	01M0SKRFC632Z15RBDQJSQX5HA
SHA-256 Document Hash	2418ddca91292c251dcf085080becb00942766ea4572f198e51ff4c80bfda16d
Recipient Name	Miss Garry Mackinnon
Recipient Email	mackinnongarry33@gmail.com
Signing Timestamp (UTC)	2026-08-24 10:11:18
IP Address	148.252.164.44
Browser	Chrome on Android

Signing Consent & Review

Document opened	2026-08-24 10:06:39 UTC
Document reviewed (scrolled through)	2026-08-24 10:10:33 UTC
Consent confirmed	2026-08-24 10:11:18 UTC from 148.252.164.44

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Event	Timestamp (UTC)	IP Address	Browser
Document created	2026-08-24 10:06:21	45.145.101.64	Unknown browser
Document sent to recipient	2026-08-24 10:06:34	45.145.101.64	Unknown browser
Document opened by recipient	2026-08-24 10:06:39	66.249.81.169	Chrome
Document opened by recipient	2026-08-24 10:06:53	148.252.164.44	Chrome
Document opened by recipient	2026-08-24 10:06:54	192.178.11.137	Chrome
Document reviewed (scrolled through)	2026-08-24 10:10:33	148.252.164.44	Chrome
Legally-binding consent confirmed	2026-08-24 10:11:18	148.252.164.44	Chrome
Document signed	2026-08-24 10:11:18	148.252.164.44	Chrome

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