


Make a Claim

This form is for pupils who want to make a disability discrimination claim to the Additional Support Needs Tribunal (we call this **the Tribunal** in this form).

A **claim** is an appeal to the Tribunal that an education authority, an independent school or a grant-aided school has discriminated against a pupil because of a disability.

This form is available in larger font and in other languages. If you don't have access to the internet a copy of the relevant information can be posted to you.

If you have any questions or need more information to complete this form, please call us on **0141 302 5860**.

An illustration of a child with a yellow face, rosy cheeks, and pink hair, wearing an orange sweater and dark pants. The child is standing on a light blue hill and holding a smartphone. To the left of the child is a black signpost with an orange arrow pointing right. The arrow contains the text 'Are you in the right place?'. The background consists of rolling light blue hills under a white sky.

Are you in the right place?



Hello!

Welcome to the Additional Support Needs Tribunal. We call this **the Tribunal** in this form. You can go to our **needs to learn** website for word meanings and other help using this link:

<https://healthandeducationchamber.scot/needstolearn/help-starting/word-meanings>

You are not on your own. The Tribunal's staff are here to help you.



If you think you have not been treated fairly at school then you can make a **claim**.

To do this, please fill in this form.

You can use different ways to speak to us including writing, drawing, speaking in person or sending a video message.

You can speak to the Tribunal about this.

To help you to fill in this form you can read the **Children's Guide on How to Make a Claim** using this link: <https://www.healthandeducationchamber.scot/additional-support-needs/publications/39>



Making a different type of appeal (reference)

If you want to change the support you get at school then you can make a different appeal to the Tribunal called a **reference**.

To do this, you will need to fill in the **Make a Reference form** which is available on our **needs to learn** website using this link:

<https://www.healthandeducationchamber.scot/additional-support-needs/publications/215>



Your Contact Details

Name:

The name I am known as (if this is different):

Date of birth:

Address:

Home telephone number:

Mobile number:

Email address:

The law says that the Tribunal can only send certain information by secure email. If it is not possible to do this, the Tribunal may need to send you information by post.



Your Parent's Contact Details

(Parent includes a carer or a guardian)

You don't have to tell us this, but it helps us if your parent decides to come to the hearing.

Name of parent:

Relationship to you:

Address:

Home telephone number:

Mobile number:

Email address:



The Responsible Body

A **responsible body** can be an education authority, an independent school or grant-aided school.

Name of responsible body:

Name of contact person:

Address:

Town/City:

Postcode:

Telephone number:

If you are not sure what a responsible body is, you can read page 7 of the **Children's Guide on How to Make a Claim** using this link:

<https://www.healthandeducationchamber.scot/additional-support-needs/publications/39>



Your Disability

To be able to make a disability discrimination claim you need to have a disability.

If you are not sure what a disability is you can read page 8 of the **Children's Guide on How to Make a Claim** using this link:

<https://www.healthandeducationchamber.scot/additional-support-needs/publications/39>

Disability

Please tick which, if any, of the following apply.

Attention Deficit Hyperactive Disorder (ADHD)

Autistic spectrum

Dyslexia

Dyscalculia

Dysgraphia

Hearing impairment

Obsessive Compulsive Disorder (OCD)

Physical or motor impairment

Visual impairment

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Mental health – please provide details in the box below.

Other type of disability – please provide details in the box below.

When did the disability or disabilities start?

Tell us what effect the disability or disabilities have on your day-to-day life.

Tell us if you have any medication or treatment.

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Tell us how the disability or disabilities affect your ability to do normal day-to-day activities.

If you have any letters or other papers which describe the disability and how it affects you, please send copies of these to the Tribunal with this form.



Your Claim

You must make your claim on time. The deadline for sending this form to the Tribunal is **6 months** from the date of the discrimination that your claim is about.

What type of disability discrimination is your claim about? Tick all boxes that apply.

Admission to school

Exclusion from school

Another issue to do with education

When did the discrimination take place?

Where did the discrimination happen?

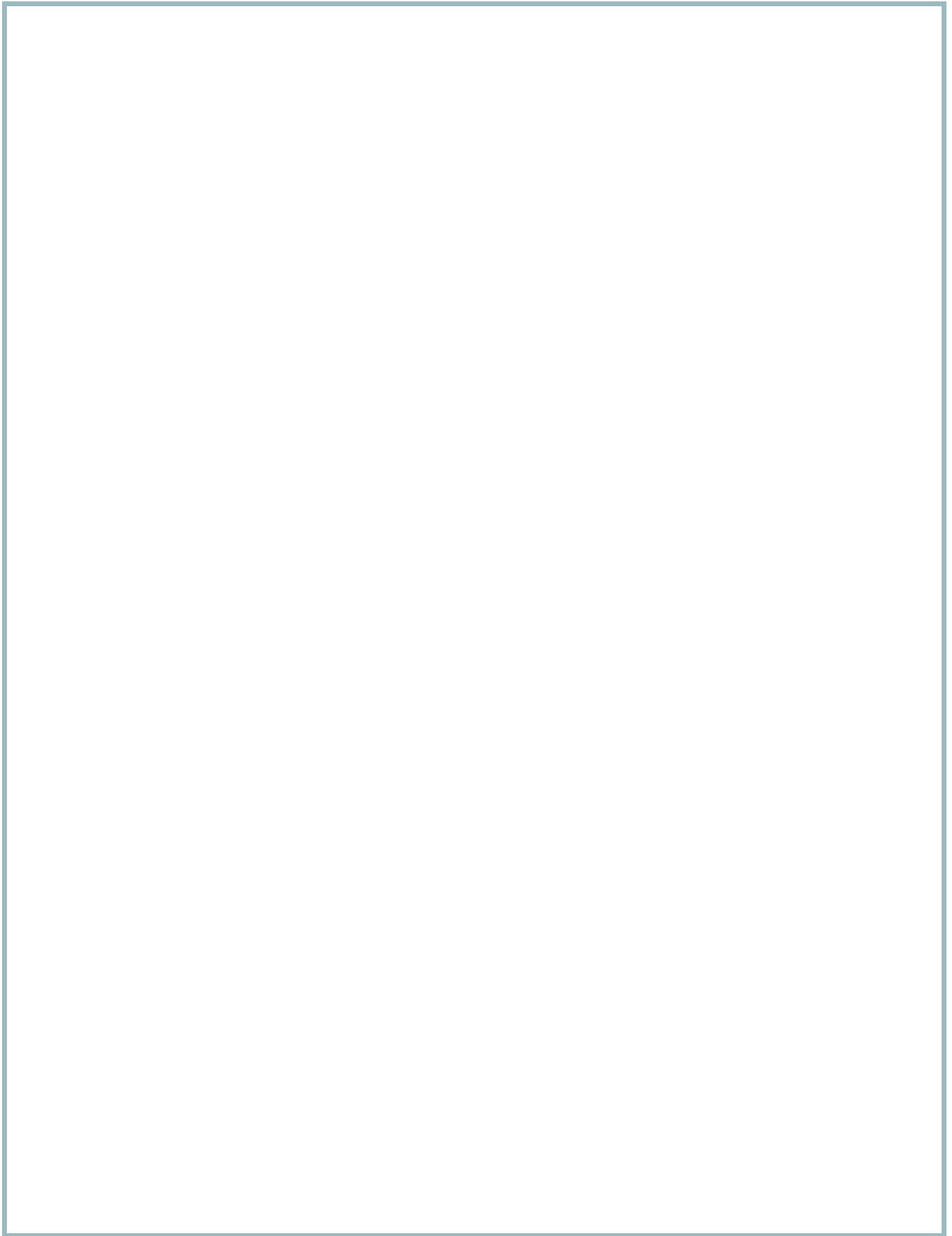
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Who was involved (give their names and contact details)?

What happened?

Continued on the next page >

Why do you think this was wrong?

A large, empty rectangular box with a thin blue border, intended for a student to write their response to the question above.



Your Supporting Information

If you have any letters or other papers that you think will help the Tribunal to understand your reasons for making the claim, please send copies of these with this form.

Tell us anything else you want the Tribunal to know.



Witnesses

Tell us the name and contact details of any people (we call them **witnesses**) you want to speak to the Tribunal.

Name:

The position they work in:

Their address:

Their phone number:

Their email address:

Name:

The position they work in:

Their address:

Their phone number:

Their email address:

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Name:

The position they work in:

Their address:

Their phone number:

Their email address:

Name:

The position they work in:

Their address:

Their phone number:

Their email address:

Name:

The position they work in:

Their address:

Their phone number:

Their email address:



United Nations Convention on the Rights of the Child

We call this the **UNCRC**.

You have a number of rights under the UNCRC (these are set out as Articles in the UNCRC, and every Article has a number). These rights are now protected by Scottish law.

You will find the UNCRC Articles in the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act 2024:

<https://www.legislation.gov.uk/asp/2024/1/schedule>

If you want to use the UNCRC as part of your claim, please tell us here. You can use the UNCRC if you think a public authority has not done what they should in relation to your rights under the UNCRC, provided we can do what you are looking for.

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Tell us

- Which UNCRC Articles you want to use
- Why you want to use these Articles
- What you want the Tribunal to do



Tribunal Orders

If the Tribunal agrees that you have been discriminated against, the Tribunal can make legal orders that the responsible body puts things right.

What would you like the Tribunal to order?

You can read page 13 of the **Children's Guide on How to Make a Claim** for examples of Tribunal orders using this link:

<https://www.healthandeducationchamber.scot/additional-support-needs/publications/39>

The Tribunal can decide to order something instead of or as well as your request.



Your Voice

Your voice, feelings and opinions matter. The Tribunal will do its best to help you if you have any difficulties making the UNCRC application, and we will do our best to help you to prepare for a hearing.

A **hearing** is a legal meeting where three independent Tribunal members listen to evidence from witnesses and hear legal arguments before it comes to a decision – a Tribunal hearing **does not take place in a court.**

Tell us if you have any communication difficulties or other support needs.

How can we help you with these during the hearing?



Your Representative

You have the right to have someone who will act as **your representative**. This can be a lawyer or someone who is not legally qualified.

You can choose whether you want a representative or not. If you don't want a representative the Tribunal will help you to present your case.

Name of representative:

Job title:

Organisation:

Address:

Telephone number:

Email address:



Your Supporter

You can have a supporter in a hearing. This is not the same as a representative. Your supporter is there for you. They cannot speak to the Tribunal.

Name of supporter:

Address:

Telephone number:

Email address:

If you want more information about the role of a representative or a supporter, you can read pages 12 and 13 of the **Children's Guide on How to Make a claim** using this link: <https://www.healthandeducationchamber.scot/additional-support-needs/publications/39>



Last bit

Read over the form and check that you have answered all of the questions. Once you have completed the form please **sign** here.

Your signature:

Date:

Thank you for filling in this form.

Please send this form and all supporting information to the Tribunal. You can do this by email or post. **Remember to keep your own copy of everything you send.**

Our contact details:

Additional Support Needs, Health and Education Chamber
First-tier Tribunal for Scotland
3rd Floor, Glasgow Tribunal Centre
20 York Street, Glasgow G2 8GT

Email: ASNTribunal@scotcourtribunals.gov.uk

You must also send a copy of your claim to the Equality and Human Rights Commission. You can send this by email or post.

Their contact details are:

Equality and Human Rights Commission
140 West George Street
Glasgow G2 2HG

Email: LegalRequestScotland@equalityhumanrights.com



What happens next?

We will read your form to see if the Tribunal can help.

We will then contact you to let you know what will happen next.

If we need more information we will ask you.

For more information about what happens next, you can visit our **needs to learn** website: www.needstolearn.scot

If you have any questions, you can call us on **0141 302 5860**.