

Application for investigation of substance (merits) and/or maladministration

Please complete this form if you would like the Service Complaints Ombudsman (the Ombudsman) to investigate the substance (merits) of a Service complaint and/or the alleged maladministration in the handling of a Service complaint.

You can only make an application if you have received a **final** decision (at the Appeal Body or Defence Council level) on your complaint as part of the internal process. This means you must have appealed the initial decision on your complaint made by the Deciding Body, if it was open to you to do so. You must have then received a decision at the Appeal Body stage.

Completed applications must be made within **six weeks and two days** of the date of the final decision being posted or sent to you electronically. If you are making an application after this time it may not be accepted. There is a section in the form for you to tell us why your application is late.

When you submit your signed and dated form to the Ombudsman you need to make sure you attach the following:

- Your written statement of complaint/Annex F form**
- The decision letters on your complaint for each level**

Your application will not be considered to be complete without these documents. You **should not** supply any further documents at this time. Any other documents provided won't be accepted and may be destroyed.

Once your application has been allocated to an investigator we aim to provide you with a final decision within 20 weeks.

The Ombudsman provides independent and impartial oversight and will review all aspects of a Service complaint. This means that the Ombudsman may potentially overturn a decision made by the Services that was previously in your favour.

Our Enquiries & Referrals Team is available to help if you need any further information or assistance to complete this form.

Please phone **020 7877 3450** or email contact@scoaf.org.uk

Section 1 – Personal details

Please complete all fields in this section

Surname/ Family Name			
Given Name(s)			
Title (Mr, Mrs, Rank etc)			
Address			
Email			
Phone			
Preferred method of contact	<input type="checkbox"/> Email	<input type="checkbox"/> Phone – Home	<input type="checkbox"/> Phone – Mobile
	<input type="checkbox"/> Phone – Work	<input type="checkbox"/> Phone – Other	<input type="checkbox"/> Post
<p>Are there any restrictions on when/how we can contact you? We need to know if there are certain days or times when we cannot contact you – including leave or deployment. If we cannot contact you or you fail to co-operate then your case might be closed.</p> <p style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>			

Application for investigation of substance (merits) and/or maladministration

Service Number		Rank	
Please tick which Service you are, or were previously, in			
<input type="checkbox"/> Royal Navy	<input type="checkbox"/> Royal Marines	<input type="checkbox"/> Army	<input type="checkbox"/> RAF
Are you currently, or were you previously, serving as a Reservist?			
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to answer	
Currently serving?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date of discharge
If no longer serving please provide your title (for example Mr, Mrs, rank)			
Unit and location (or last unit if no longer serving)			
Gender	<input type="checkbox"/> Prefer not to answer		
Are there any adjustments we can make to help you access our service? Such as providing information in a specific format. We will not share this information with the Service.			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
Add Page			

Section 2 – Application type and initial eligibility

Please complete all fields in this section

What type of application are you making?

Substance only (You think the final decision in your complaint was incorrect and you would like the Ombudsman to conduct a fresh investigation.) **Please complete [section 3](#) of this form.**

Maladministration only (You think there was something wrong with the way your Service complaint was processed/handled. You want the Ombudsman to investigate and decide if it was dealt with properly.) **Please complete [section 4](#) of this form.**

Substance and maladministration (You think the final decision was incorrect and you think there was something wrong with the way your Service complaint was processed/handled. You would like the Ombudsman to decide if it was dealt with properly and conduct a fresh investigation into the complaint itself.) **Please complete sections 3 and 4 of this form.**

Date of final decision

Is this more than six weeks and two days from when the final decision was posted or sent to you electronically?

Yes No

If yes, please let us know why you have not made your application to the Ombudsman earlier - The legislation that gives the Ombudsman her powers states that applications must be made to the Ombudsman within six weeks and two days of the date the final decision was posted or sent electronically to the complainant. If an application is made after this time, the Ombudsman can only accept it if it is 'just and equitable' to do so. We need to know why you did not make your application within six weeks and two days so that we can decide whether it is just and equitable to accept it outside of the time limits.

[Add page](#)

Section 3 – Substance (merits) application

Only complete this section if you want the Ombudsman to conduct a substance (merits) investigation. If you are only applying for a maladministration investigation do not fill this section out - go straight to [section 4](#). If you are applying for both substance and maladministration investigations, you need to complete both sections 3 and 4.

a) Why do you think the decision reached in your complaint was wrong?

Please include all relevant information. Not all applications are accepted for investigation so it is important that you give a clear overview of why you believe a new investigation is required.

[Add Page](#)

b) How have you been affected by what has happened?

[Add Page](#)

c) What outcome do you want? We may not be able to achieve what you want, but it is important for us to know what your expectations are. If what you want cannot be achieved, we will let you know

[Add page](#)

Section 4 – Maladministration application

Only complete this section if you want the Ombudsman to investigate alleged maladministration. If you are only applying for a substance (merits) investigation do not fill this section out. If you are applying for both substance (merits) and maladministration investigations, complete both sections 3 and 4.

a) What part/s of your complaint do you believe were processed/ handled incorrectly? Not all applications are accepted for investigation so it is important that you give a clear overview of why you believe there has been maladministration. Brief information or bullet points are sufficient at this stage, as the investigator will request more information from you if it is needed.

[Add Page](#)

b) How have you been affected by what has happened?

[Add Page](#)

c) What outcome do you want? It may not be possible for you to get the outcome you want, but it is important for us to know what your expectations are. If what you want cannot be achieved we will let you know.

[Add Page](#)

Section 5 – Privacy statement

The Office of the Service Complaints Ombudsman is committed to the protection of your privacy in accordance with the Data Protection Act 2018. Our aim is to ensure that the information you provide to us is handled in a secure, efficient and confidential manner.

How do we process your information?

When you complete our application form, whether online or hard copy, we will transfer the information you provide to an electronic record using our Case Management System.

In the next section you will be asked to give consent for us to process and use your information. We have clearly set out each of the ways the OSCO may use your information.

What if I have concerns about how my personal information is handled?

If you are concerned about how we handle your personal information you have the right to make a complaint. You can do this by contacting our data protection officer at privacy@scoaf.org.uk

You can visit our website for more information about what we do with your personal information please read our privacy policy which can be found on our website www.scoaf.org.uk.

Application for investigation of substance (merits) and/or maladministration

Section 6 – Consent

Please read through the following information carefully and tick each box to indicate that you have understood before signing and dating the consent. We cannot process your application if you do not complete this section.

If you are completing this form electronically, you can type your name into the signature box. This will be accepted as consent if you send the form from your personal email account.

<input type="checkbox"/>	I give consent for the Ombudsman to take the action I have requested in section 2 of this form		
<input type="checkbox"/>	I understand that after an initial review the Ombudsman may decide that she cannot accept my application or will only accept certain aspects of my application for investigation		
<input type="checkbox"/>	I understand that the decision made by the Ombudsman is final and binding		
<input type="checkbox"/>	The Ombudsman is registered under the Data Protection Act 2018 (registration number ZA117749). I understand that the Ombudsman must keep a record of the personal information that I provide and that she may need to: <ul style="list-style-type: none">• share information about my application with the Service• ask the Service for information about my complaint• use anonymised information about my application in her Annual Report• report any concerns for my safety or the safety of others to the appropriate persons		
<input type="checkbox"/>	I understand that the Ombudsman will keep a record of the personal information I provide for a period of no less than 10 years. After this time my file will be destroyed		
<input type="checkbox"/>	I _____ give consent for the Service to release to the Ombudsman any relevant medical information contained within my Service complaint file for the purpose of considering or investigating my application investigation		
Signature		Date	

Checklist

Before you submit your form take time to double check that you have:

- completed all fields in section 1 and told us about any limitations on how/when we can contact you
- completed all fields in section 2
- completed section 3 if applying for a substance (merits) investigation
- completed section 4 if applying for a maladministration investigation
- given reasons for any delay if your application is being made more than six weeks and two days after the date of the final decision being posted or sent to you electronically
- ticked all the boxes in the consent section
- signed and dated your form
- attached your written statement of complaint/Annex F form **and** the decision letters from each level for your complaint

How to submit your form

You can submit your completed application form by email or post. If you are submitting your application by post please obtain proof of posting or use recorded delivery.

Remember, you need to send us a copy of your written statement of complaint/Annex F form and the decision letters from each level for your application to be considered complete. Do not send through any other documents at this stage.



contact@scoaf.org.uk



PO Box 72252
LONDON
SW1P 9ZZ

We will acknowledge your application within two working days of receiving it. If you have not received an acknowledgement after that time please contact us.

Reasonable adjustment – additional page

Return to main application form

Late application – additional page

Return to main application form

Why do you think the decision reached in your complaint was wrong? – additional page

Return to main application form

How have you been affected – additional page (substance)

[Return to main application form](#)

**What outcome do you want? – additional page
(substance)**

[Return to main application form](#)

What part/s of your complaint do you believe were handled incorrectly – additional page

[Return to main application form](#)

**How have you been affected – additional page
(maladministration)**

[Return to main application form](#)

**What outcome do you want? – additional page
(maladministration)**

[Return to main application form](#)