Mental Health Tribunal for Scotland – Hearing Preference Form

(for patients in specified hospitals only and community patients in specific areas – please see our website for details)

Name of patient:

Type of application (CTO etc, or section of 2003 Act):

Name and job title of person completing form:

Contact details:

Might the patient wish to attend their hearing? YES/NO

If **yes**, then unless advised of a preference for another format we will schedule an in-person hearing. As with hearings before March 2020, telephone attendance by individuals at in-person hearings will be possible.

If **no**, we will select a format according to what is available.

Please use the space below, if required, to add information we should have in determining what type of hearing to arrange, such as that the patient would prefer a telephone hearing or any assistance the patient may need to communicate at the hearing. A video-conference may also be possible, if there are features making this the most suitable format; please contact [mhtswebex@scotcourtstribunals.gov.uk](mailto:mhtswebex@scotcourtstribunals.gov.uk) for further information about video-conferences using WebEx.

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