



# Application for Crime Victim Compensation

You were the victim of an intentional crime of violence in the Netherlands after 1972? And you suffered a serious physical or psychological injury because of this crime of violence? In that case, you may be eligible for compensation from the Criminal Injuries Compensation Fund [Schadefonds Geweldsmisdrijven]. Apply using this form.

## Submit the application in 3 steps

1. Complete the form fully and truthfully. Carefully read the explanation on page 5.
2. Enclose copies of your identity document and the supporting documents.
3. Send everything to:

**Schadefonds Geweldsmisdrijven**  
**Antwoordnummer 91052**  
**2509 VC Den Haag**  
**The Netherlands**

## Do you have questions?

Please contact the Compensation Fund or go to [www.schadefonds.nl](http://www.schadefonds.nl).

**T** +31 70 – 414 20 00  
**E** [info@schadefonds.nl](mailto:info@schadefonds.nl)

## Do you need help completing the form?

Victim Support Netherlands offers free help and can be reached by telephone on +31 (0)900–0101 or through [www.slachtofferhulp.nl](http://www.slachtofferhulp.nl).

Please do not write here.

Recognition gives strength Together involved

## 1A Victim

Fill in the particulars of the person the compensation is applied for.

► *Enclose (mandatory): copy of the victim's identity document*

A.1	Last name	<input type="text"/>	sex (of 'gender?') <input type="checkbox"/> m <input type="checkbox"/> f
A.2	First name(s)	<input type="text"/>	
A.3	Date of birth	<input type="text"/>	
A.4	Citizen Service Number	<input type="text"/>	
A.5	Street and house number	<input type="text"/>	
A.6	Postal code and city/town	<input type="text"/>	
A.7	Telephone number(s)	<input type="text"/>	
A.8	Availability, during office hours	<input type="text"/>	
A.9	E-mail	<input type="text"/>	

A.10 IBAN for payment of the compensation ▶ Enclose: a copy of your bank card in the name of

When you fill in your telephone number or e-mail address, we assume you may be contacted this way.

## 1B Legal representative

If the victim is underage or under guardianship, the legal representative enters his/her information here.

B.1 What is your relation with the victim? ☐ Parent ▶ Enclose (mandatory): copy of the parent's identity document  
☐ Guardian ▶ Enclose (mandatory): copy of the identity document and the guardianship  
☐ Curator ▶ Enclose (mandatory): copy of the identity document and conservatorship

B.2 Last Name sex ☐ m ☐ f

B.3 First name(s)

B.4 Citizen Service Number

B.5 Street and house number

B.6 Postal code and city/town

B.7 Telephone number(s)

B.8 E-mail

## 2 Authorised representative

If someone acts on your behalf in the application process, that person enters his/her information here.

2.1 Last name sex ☐ m ☐ f

2.2 First name(s)

2.3 Name of organisation

2.4 Street and house number

2.5 Postal code and city/town

2.6 Telephone number(s)

2.7 E-mail

## 3 What happened?

In need of extra writing space? Please refer to the page for additional information.

3.1 You are the victim of a ? (multiple options) ☐ Physical Abuse ☐ Sex Crime  
☐ Threat of Violence ☐ Hold-up / Robbery  
☐ Stalking ☐ Human Trafficking  
☐ Other, namely

3.2 Crime scene

3.3 Crime date / period

3.4 Did you file a report? ☐ Yes ▶ [Proceed to question 3.5](#)

☐ No ▶ [Please describe what happened on the page for additional information and proceed to question 4](#)

3.5 Where did you file the report? (municipality) \_\_\_\_\_

3.6 Official report number report \_\_\_\_\_

▶ [If you have a copy of your report of the of the official report of the police, please enclose these.](#)

3.7 Were (are) criminal proceedings brought against the suspect? ☐ Yes ▶ [Proceed to question 3.8](#)

☐ No ▶ [Proceed to question 4. Has the case been dismissed? Proceed to question 3.8](#)

public prosecutor's office no. \_\_\_\_\_

3.8 Data of the criminal case \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## 4 What injury did you suffer?

### Bodily injury

▶ [Please enclose the available medical documents.](#)

4.1 Have you been injured physically due to a violent crime? ☐ No ▶ [Proceed to question 4.5](#)

☐ Yes, namely: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

▶ [Proceed to question 4.2](#)

4.2 Have you been treated for this? ☐ Yes ▶ [Proceed to question 4.3](#)

☐ No ▶ [Proceed to question 4.5](#)

4.3 What kind of medical assistance did you receive? (multiple options)

☐ General ☐ Surgical treatment

☐ Emergency care ☐ Hospitalisation for more than 24 hours

☐ Hospital/outpatient clinic ☐ Otherwise, namely \_\_\_\_\_

\_\_\_\_\_

commencement date end date

4.4 Medical assistance period \_\_\_\_\_ ☐ ongoing

### Psychological injury

▶ [Please enclose the available medical documents.](#)

4.5 Were you injured psychologically due to a violent crime? ☐ No ▶ [Proceed to question 5](#)

☐ Yes, namely: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

▶ [Proceed to question 4.6](#)

4.6 Have you been treated for this? ☐ Yes [▶ Proceed to question 4.7](#)  
☐ No [▶ Proceed to question 5](#)

4.7 Who was your therapist? (multiple options possible)  
☐ mental healthcare [GGZ] / psychologist  
☐ Practice nurse  
☐ Otherwise, namely

4.8 What is the name of your therapist?

4.9 What is the name of the organisation where you were treated?

4.10 Treatment period commencement date end date ☐ ongoing

4.11 How often have you been treated?

If you would like to give more information on the crime, its consequences or impact or on the restrictions you have (had) because of the injury suffered, you may do so on the page for additional information.

## 5 The existence of the Compensation Fund

5.1 How do you know of the existence of the Schadefonds?  
☐ Victim Support Netherlands ☐ Legal expenses insurer  
☐ Police ☐ Public Prosecution Service  
☐ Attorney-at-law ☐ Slachtofferwijzer  
☐ Centre for Sexual Violence ☐ Mental health care (e.g. psychologist, psychiatrist)  
☐ General practitioner ☐ Internet  
☐ Other, namely

## 6 Signature

**Attention!** If the victim is underage or under guardianship, the legal representative signs here.

**I have completed this form truthfully.**

6.1 Date and place

6.2 Name

*By signing this form, you consent to the processing of your (personal) data.*

6.3 Signature

Please print the form to sign it.

# Explanatory notes to the form 'Application for Crime Victim Compensation'

## General information

### What is the Criminal Injuries Compensation Fund?

The Criminal Injuries Compensation Fund is an independent body of the central government. It makes single payments to victims of intentional crimes of violence who, as a consequence, suffered a serious physical or psychological injury. Surviving relatives of victims who are either dead because of a violent crime of passed away because of a culpable offence may also be eligible for compensation of the Compensation Fund. This also applies to the families of victims who suffered a serious and permanent injury because of the violent crime.

### Examples of crimes of violence are?

Physical abuse, robbery, incest, rape, threat of violence, stalking, and human trafficking.

### How does the Compensation Fund determine whether an injury is serious?

To this end, the Compensation Fund has a list of injuries. This list indicates the physical or psychological injuries considered to be serious by the Compensation Fund. For this list of injuries refer to [www.schadefonds.nl](http://www.schadefonds.nl). The Compensation Fund may also ask a medical consultant to assess the injury.

### What is the intention of the compensation?

The compensation is a social expression of solidarity and a token of acknowledgement of the wrong and the distress the victim has suffered. The compensation is paid from taxpayers' money and is not intended to cover all damages. The compensation is intended to restore some confidence to the victim and to support the victim financially, so that he/she may again focus on the future. The recipient may spend it as he/she pleases.

### How does the Compensation Fund determine the amount of the compensation?

The Compensation Fund uses six injury categories, which relate to six corresponding amounts. The Compensation Fund determines which injury category corresponds with the injury suffered. The corresponding amount is the compensation paid to the victim for the injury (the immaterial damage) suffered and any resulting loss incurred, such as medical expenses and reduced income.

### Did a relative of yours die as a result of a violent crime?

In that case, you can apply for compensation by completing the form 'Application Compensation for Surviving Relative'. For this form, refer to [www.schadefonds.nl](http://www.schadefonds.nl).

### Time limit for submission

The Compensation Fund will handle your application if it has been submitted within ten years after the (end) date of the violent crime. The Compensation Fund can only handle applications submitted after this period, if a valid reason is given for the delay.

### Damages

The Compensation Fund only gives compensation for damage/loss that has not been compensated for otherwise. Did you receive damages from, for example, the offender or your insurance company? In that case, you must fill in the amount of the damages received. Please also enclose proof of the damages, showing the amount received and the damage/loss covered. The Compensation Fund will then determine whether this amount must be set off against the compensation.

What to do if you receive damages after you have received compensation from the Compensation Fund? It is important that you inform the Compensation Fund thereof. The Compensation Fund will then determine whether this amount must be set off against the compensation.

## Information per question on this form

### 1A Victim

You fill in your data here. Also fill in your IBAN (bank account number) to which the Compensation Fund can transfer the compensation, if applicable.

**Attention!** You cannot state a savings account

### 1B Legal representative

If the victim is a minor or has been placed under guardianship, the legal representative must fill in his/her details here. A legal representative is the victim's parent, guardian, or administrator.

### 2 Authorised representative

If you want someone else to act on your behalf in the application procedure, you can authorise someone, for example, an employee of Victim Support Netherlands or a family member.

### 3 What happened?

In this section, you provide information about the violent crime, your report, and, if applicable, the criminal proceedings against the suspect/offender.

The Compensation Fund needs details about any criminal proceedings to be able to assess your application better. If you provide more information, the Compensation Fund will be able to assess your application faster and better.

**Attention!** The Compensation Fund will never contact the offender/suspect.

### 4 What injury did you suffer?

In this section, you give information about the injury you suffered as a result of the violent crime. You also give information about any treatment or medical help you received for this injury. In some cases, the Compensation Fund wants to request information from your practitioner.

**Attention!** If you give more information about your injury and healthcare providers, the Compensation Fund will be able to assess your application faster and better.

### 5 The existence of the Compensation Fund

Here you state how you have learned of the existence of the Compensation Fund.

### 6 Signature

Please follow the instructions on the form for signing the form correctly.

### Do you want to add any information about the violent crime or about its consequences?

To this end, use the page for additional information.

## Additional information

Do you need more writing space to complete the form? In that case, you can use this page to finish your answers.

Refer to the question number that relates to the answer.

Question no.	Addition
--------------	----------

[illegible]