

The purpose of this questionnaire is to record pertinent information about the person you care for – this will be used by the police and search teams in the event that the person goes missing. Once completed please keep this questionnaire in a safe place and produce to the police in the event of an emergency. This vital information will help the search teams to gather all the relevant information and begin searching. Recording this information ahead of time and keeping it regularly updated will greatly reduce stress associated with trying to recall detailed information in an emergency situation. If possible, please also attach a clear and recent head and shoulders photograph to this form.

If the person you care for goes missing, without delay ring 999, complete as best you can the "Missing Now " section and hand to police when they attend your location.

Background		
First name Last Name / Family Nam	e	
Known as / Nickname	First Spoken Language	Please attached a recent photo here.
Mobile phone number		Please find one that is up to date and a good likeness of the person.
Do they have a GPS Trac	ker /if yes give details.	
Current address		

Living here since

## Physical Description

Date of Birth / Age	Gender	Build		
	11.1.1.1.4			
Race / Ethnicity / Complexion	Height	Weight		
Marks / Scars / Tattoos	Hair colour / cut	Eye colour / glasses		
Other distinctive feature (e.g. facial hair)				

## **Medical History**

Medical conditions

Communication difficulties
Physical impairments

Vital medication
Frequency

Symptoms if missed

Image: Symptom set of the set

Information for searchers (e.g. scared of being touched, things that make me anxious, scared of dogs, etc.)

## Life History (use 'Additional information' space at the end if required)

All Occupation/Hobbies/Passions/Interests/Volunteer work

All Favourite place(s) to spend time

Typical modes of travel (Bus pass etc.) List Oyster card/freedom pass number

All Favourite / likely destination(s)

All Favourite footpath / track

Family or friends living nearby

Question	Answer
How easily can the person walk?	
If walking, how far can they get before becoming tired?	
Do they use a stick or other walking aid?	
How might they react to being upset or scared?	
Are they able to drive?	
Do they have a car?	
Church/Mosque/Synagogue/Temple?	
Houses/friends who they visit?	

Life History (continued)	
All Previous addresses	Approximate dates
All work / school name and address( please use extra pages	if necessary) Approximate dates
If missing previously, where found?	
Circumstances: How found / how far / time missing	
Additional information	

Carer/Family Information		
Your name	Relationship to person reported missing	
Address		
Home phone number	Mobile phone number	
Alternative contacts (guardian/social worker)		

Place last seen	Medication last taken
	Place last seen

Car details/carrying anything/have cash or bank cards

Situation/recent discussion/recent notable date/contact with friends or family

Any other information