

# **Mountain Rescue England & Wales**

## **Search Planning and Management Course**

# **Missing Person Questionnaire**

Incident Name: \_\_\_\_\_

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## Missing Person Questionnaire

Please fill all boxes, answer all questions, and print clearly without the use of unfamiliar abbreviations and/or confusing phrases/words. (First Notice information = sections A–E only.)

<b>General and Informant Information</b>							<b>A</b>
Case Name/Number:			Agency/Org:				
Date:	Time:	Location:					
Interviewer Name:			Title:	Agency/Org:			
Reported missing by:				DOB:			
Address:							
Home Phone:				Bus. Phone:			
Mobile Phone:				Other Phone(s):			
Occupation:				Employer:			
Email(s):							
Relationship to subject:							
Where can be reached in next 24 hours:							
What does this person think happened?							
Where does this person think the subject is?							
Search efforts prior to calling for SAR:							
Instructions to informant:							
Other persons interviewed (name, contact info, date, time, relationship, DOB):							
<b>Missing Person</b>							<b>B</b>
Full Name:				Nickname(s):			
Name to call:				Alias(es):			
Safe word?	Y	N	Word:	Who knows it:			
Subject's primary language:					Speaks English?	Y	N
Other languages spoken:					Sign Language?	Y	N

## Missing Person Questionnaire

Home address:							
Home Phone:			Bus. Phone:				
Mobile Phone:			Other Phone(s):				
Occupation:			Employer:				
Email(s):							
Category(ies) of lost subject:							
General experience and familiarity with area:							
General quality/quantity of equip. carried and preparedness for environment:							
Comments:							
<b>Physical Description</b>					<b>C</b>		
Age:	Race:	Gender:	Hgt:	Wt:	DOB:		
Build:							
Hair Color:		Length:		Style:			
If balding, describe:				Eye Color:			
Describe all facial hair:							
Glasses	Regular:		Sun:		Contacts:		
Describe glasses:							
Eyesight without glasses:							
Facial features, shape:							
Complexion:							
Distinguishing marks, scars, tattoos:							
Fingerprints on file?	Y	N	Where?		Fake nails?	Y	N
General appearance:							

## Missing Person Questionnaire

<b>Clothing Worn When Last Seen</b>		<b>D</b>
Hat/Cap/Scarf:		
Shirt/Blouse:		
Trousers:		
Dress:		
Sweater/Pullover:		
Coat/Jacket/Rain Gear:		
Footwear:		
Sole pattern and how known:		
Hose/Socks:		
Underwear:		
Other:		
Describe all accessories worn such as belt, rings, watch, pins, necktie, tie clip, etc.		
<b>Details of Incident</b>		<b>E</b>
Location missing from:		
Point last seen (PLS):		
Last known point (LKP):		
Day/Date last seen:	Time last seen:	
Last seen by whom:		
Accompanied by animal(s)? (describe):		
Vehicle description, if driving:		
Destination(s), stated intentions:		
Possible alternative destinations:		
Route, possible route, how determined:		
Weather at time of loss:		
Use computer software to determine route(s)?	What used?	

## Missing Person Questionnaire

Access to this computer?		Where?				
Other resources used to plan trip/outing (books, guides, maps, brochures):						
Events of last 24 hours leading up to time of loss:						
Familiar with area?						
Person most familiar with area? Hazards? Contact info:						
<b>Equipment Carried</b>						<b>F</b>
Describe ALL items carried such as pocketbook, wallet, backpack (describe contents of each), matches, lighter, keys, pocket knife, camera, weapon, ammunition, etc. (style, color, brand, size).						
(use additional pages, if necessary)						
Describe any food and water and/or drinks carried, including alcohol:						
Describe any pets or animals:						
Electronic Device			Battery			
Carried?	Y	Type	Status	Spare?	Type	Last Changed
Cell Phone						
GPS						
Radio						
Beacon						
Location Service						
Project Lifesaver						
Other:						

## Missing Person Questionnaire

Mobile Phone	Provider:	Number:	PIN/Password:
	Model:	Attempt to call?	Left message?
	Text message sent?	User know how to text?	Message sent:
GPS	Default settings:	Datum:	Able to set waypoints?
	Able to record routes?	Able to download routes?	Able to go to waypoint?
	Is the computer to which routes were downloaded available?		
Radio frequency:	Radio PL/CG (used?)	Check-in time/interval:	
Beacon number:	Beacon registered?	Web password:	
Proj Lifesaver Freq:	RFID #	On Subject:	
Other:			
<b>Subject's Experience</b>			<b>G</b>
City/Township/County/ State/Country of residence:			How long?
Previous residence:			How long?
Birthplace:			
Has the person been the subject of a search before?			
If so, describe the details (date(s), circumstances, how long missing, where and when found, condition when found, actions taken by subject, lost in group? (contact info for others in group, etc.)			
Additional info and comments:			
<b>Physical Health of Subject</b>			<b>H</b>
General physical condition:			
Disabilities:			
Known medical conditions:			

## Missing Person Questionnaire

Recent injuries/trauma:		Last meal:	
Recent complaints (including minor):			
Pregnant?	How long?		Menstruating?
Physician:		Phone:	
Address:			
<b>Vision</b>			<b>I</b>
Glasses?	Contacts?	Type of Contacts:	Time stay in:
Spare glasses/contacts:		Corrected vision:	Uncorrected vision:
Color blindness?	Type:	Night vision problems?	
Other visual problems:		Vision last checked:	
Optometrist/Optom. contact info:			
<b>Mental/Emotional Health</b>			<b>J</b>
General mental health:			
Known mental problems:			
Suicidal?	Previous attempts (explain):		
Is subject dangerous to self or others? (explain)			
Does subject have access to, or possibly carrying, a weapon?			
Are all weapons accounted for?		Ammo accounted for?	
Fears and phobias:			
Knowledgeable person:		Contact info:	
Title:		Address:	
Physician specialist:		Contact info:	
Case manager:		Contact info:	

## Missing Person Questionnaire

Therapist(s):		Contact info:	
<b>Medications: Prescription and Non-prescription</b>			
Med name, strength, dosage, etc.	Affect if not taken	Lethal dose	
<b>Identification</b>			
Drivers Lic	State:	No:	Issue Date:
Other ID:			
Enrolled in MedicAlert®, Safe Return®, or similar program? (describe)			
Electronic tracking device? (describe)			
<b>Finances</b>			
Credit & ATM cards: List card names and account numbers.			
Checking and savings accounts: List banks and account numbers.			
Does subject have credit cards or checkbook in possession?		Y	N
Cash Carried:			
Describe:			

## Missing Person Questionnaire

<b>Detailed Subject History</b>										<b>N</b>
Single >		Married >		Divorced >		Widowed >				
Spouse's name:					Phone:					
Address:										
Siblings (name, age, residence – add page if necessary)										
Father's name:								Living?	Y	N
Contact info:										
Occupation and employer:										
Mother's name:								Living?	Y	N
Contact info:										
Occupation and employer:										
Other relatives who may have info:										
<b>Occupation &amp; Employer</b>										<b>O</b>
Primary occupation:								Retired?	Y	N
Employer:							How long?			
Contact person:										
Previous employment:										
Education level (describe):										
Military service branch:					Reserves?	Y	N	Currently active?	Y	N
Contact person:					Dates of service:					
Religion/belief system:								Active?	Y	N

## Missing Person Questionnaire

Contact person:	
Any recent contacts, changes in behavior?	
Other persons who may provide info:	
<b>Hobbies, Special Interests</b>	<b>P</b>
Experience in outdoors, backcountry:	
Survival training/experience:	
First aid training/experience:	
Favorite places to visit:	
Athletic ability, mobility:	
Swimmer, ability/non-swimmer:	
Active/outgoing or quiet/withdrawn?	
Attitude toward authority:	
<b>Personal</b>	<b>Q</b>
Recent, current or anticipated financial, legal or other problems:	
In whom does the subject confide and/or frequently talk to on the phone?	
Who last talked to the subject at length?	
When and what was the topic?	
Does the subject like animals?	
Reaction to dogs, horses?	
Recent letter or writings?	
Does the subject keep a diary/journal/bible/blog?	
Does the subject have access to a computer?	

