

SEARCH AND RESCUE
CONFIDENTIAL WITNESS REPORT

LAST SEEN	DATE:		TIME	INCIDENT TITLE:		
	DATE / TIME LAST SEEN:			PLACE LAST SEEN:		LAT/LONG
	DIRECTION OF TRAVEL:					
	SPECIAL AREAS / LOCATIONS OF INTEREST FOR SUBJECT:					
	TRAVEL PLANS?					
PHYSICAL DESCRIPTION	SUBJECT NAME		NICK-NAME	RIGHT-HANDED <input type="checkbox"/>	HANDICAPS:	
				LEFT-HANDED <input type="checkbox"/>		
	HOME ADDRESS		CITY	STATE	ZIP	
	AGE	DOB	SEX	RACE	BUILD	OTHER MARKS
	WEIGHT	HEIGHT	EYE COLOR		HAIR COLOR	HAIR STYLE
	SHIRT TYPE			SIZE	COLOR	
	PANTS / DRESS TYPE			SIZE	COLOR	
	JACKET / SWEATER TYPE			SIZE	COLOR	
	SHOE TYPE / BRAND			SIZE	COLOR	
	SOCKS			SIZE	COLOR	
CLOTHING	HAT / GLOVES			SIZE	COLOR	
	GLASSES		INNERWEAR		OUTERWEAR	
	KNOWN CLOTHING BRANDS OR SPECIAL MARKINGS (TEAM LOGOS, CARTOONS, ETC)					
	MEDICAL HISTORY					
	MEDICATIONS			TIME OF LAST MEDS:		
MEDICAL	ALLERGIES					
	LAST MEAL TIME:		LAST MEAL CONSISTED OF:			
	DOES SUBJECT SMOKE?	BRAND?		CHEW GUM?	BRAND?	

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	DOES THE SUBJECT HAVE A WEAPON:	DESCRIPTION:						
PERSONALITY	Subjects state of mind:	Any history of this subject running away?						
	Recent family problems?	Recent problems with friends?						
	Would the subject respond to a stranger calling their name?							
	Does the subject use drugs or alcohol?	Recent illnesses or injuries?						
	Does the subject often play practical jokes?							
	Is the subject comfortable around other people or strangers?							
	Any specific hobbies or skills?							
	Possible circumstances that caused subject to become lost?							
	What is/was the subjects profession?							
CRIMINAL	Criminal record:	Failure to appears:						
	Wants / Warrants issued for subject:							
CHILDREN	Afraid of Dark	Animals? Afraid of (specifics)						
	Feeling toward adults: Strangers?							
	Reactions when hurt: Training when Lost:							
	Other: (pet's name?, favorite toy?, favorite food?, being disciplined at the time of disappearance?)							
	Does the subject know the area?	Last trip here: Ever hike alone						
	Formal map / compass training?	Has the subject ever been lost before? When?						
Formal first aid training: Level? Formal survival training:								
	High	Moderate	Low	None	Agency / Location of formal training if any:			
Hiking								
Rock Climbing								
Camping								
Hunting								
Fishing								
Caving								
Subject ever belong to:		Army	Navy	Marines	Air Force	Coast Guard	Police	Fire Dept:

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VEHICLES
VESSELS

MAKE	MODEL	YEAR	COLOR	LICENSE	VIN
MAKE	MODEL	YEAR	COLOR	LICENSE	VIN

NEXT OF KIN

NEXT OF KIN NAME:	RELATION TO SUBJECT:
HOME ADDRESS:	CITY: STATE: ZIP:
HOME PHONE: WORK PHONE: CELL PHONE:	CURRENT LOCATION:
EMAIL:	
ACTIONS TAKEN SO FAR:	

WITNESS 1

WITNESS NAME:	RELATION TO SUBJECT:
HOME ADDRESS:	CITY: STATE: ZIP:
HOME PHONE: WORK PHONE: CELL PHONE:	CURRENT LOCATION:
EMAIL:	
ACTIONS TAKEN SO FAR:	

WITNESS 2

WITNESS NAME:	RELATION TO SUBJECT:
HOME ADDRESS:	CITY: STATE: ZIP:
HOME PHONE: WORK PHONE: CELL PHONE:	CURRENT LOCATION:
EMAIL:	
ACTIONS TAKEN SO FAR:	

CONTACTS

PERSON SUBJECT LIKELY TO CONTACT:	RELATION TO SUBJECT:
HOME ADDRESS:	CITY: STATE: ZIP:
REASON FOR POSSIBLE CONTACT:	
HOME PHONE: WORK PHONE: CELL PHONE:	CURRENT LOCATION:
EMAIL:	

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OTHER FRIENDS

NAME	ADDRESS	CITY	STATE	ZIP
WORK PHONE	HOME PHONE	CELL PHONE	EMAIL: CURRENT LOCATION	
NAME	ADDRESS	CITY	STATE	ZIP
WORK PHONE	HOME PHONE	CELL PHONE	EMAIL: CURRENT LOCATION	
NAME	ADDRESS	CITY	STATE	ZIP
WORK PHONE	HOME PHONE	CELL PHONE	EMAIL: CURRENT LOCATION	
NAME	ADDRESS	CITY	STATE	ZIP
WORK PHONE	HOME PHONE	CELL PHONE	EMAIL: CURRENT LOCATION	

INTERVIEWERS CHECKLIST

IS A PICTURE AVAILABLE	NEED TO RETURN?	TO WHOM?
HAS A SCENT ARTICLE BEEN OBTAINED?	WHAT?	BY WHO: TIME:
HAS THE ROOM / PLS BEEN SECURED WITH ACCESS RESTRICTED?		BY WHO: TIME:
HAS THE PLS BEEN MARKED?		BY WHO: TIME:
HAVE ANY FOOTPRINTS BEEN MARKED?		BY WHO: TIME:
HAS A FOOTPRINT CARD BEEN FILLED OUT?		BY WHO: TIME:
HAS A DIGITAL PICTURE BEEN TAKEN OF ANY FOOTPRINT?		BY WHO: TIME:

NOTES:

INTERVIEWERS NAME	RANK	DATE / TIME
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