

# PLAINFIELD POLICE DEPARTMENT

210 Norwich Road – Plainfield, CT 06374 – (860) 564-0804 – [www.plainfieldctpolice.com](http://www.plainfieldctpolice.com)

## Missing Person Form

Adult <input type="checkbox"/> Child <input type="checkbox"/>	Date and Time of Report:	Case Number:	Message Number:			
<b>Report Type:</b> Runaway <input type="checkbox"/> Habitual Runaway <input type="checkbox"/> Parental Abduction <input type="checkbox"/> Elderly <input type="checkbox"/> Special Needs <input type="checkbox"/>						
Name:						
Address:					Phone #:	
Date of Birth:		Sex:	Race:		Hispanic: YES <input type="checkbox"/> NO <input type="checkbox"/>	
Height:	Weight:	Eyes:	Hair:	Facial Hair:	Build:	Language:
Markings: (Scars, Marks, Tattoos)						
Place of Birth:		Social Security Number:		Operator's License Number and State:		
<b>VEHICLE INFORMATION</b>	Year:	Make:	Model:	Color:	Registration:	
Distinguishing Feature(s) of Vehicle:						
Clothing Description:						
Physical/Mental Conditions: _____ _____ _____ _____ _____			Medications: _____ _____ _____ _____ _____			
Present Occupation or School:					Telephone:	
Photograph Obtained: YES <input type="checkbox"/> NO <input type="checkbox"/>		Age of Photograph:		Fingerprints ever taken: YES <input type="checkbox"/> NO <input type="checkbox"/>		Reason for fingerprints:
Possible Destination or Associates:						
Social Media Information:						
Date of Last Contact:		Circumstances:				

<b>Autism or Spectrum Based Individuals Questions</b>			
What are the closest bodies of water? (pools, brooks, streams, ponds, rivers)			
What do they love? (examples: sports, games, toys, places, people)			
What do they hate? (examples: sports, games, toys, places, people)			
What was the plan? (What were the activities planned for the day?)			
Did something novel happen? (Something to trigger individual; example: barking dog, overhead helicopter)			
Where does the individual like to go when feeling overwhelmed or stressed? (examples: relative's house, library, park)			
Are they dressed appropriately for the weather? YES <input type="checkbox"/> NO <input type="checkbox"/>		How do they communicate? (Verbal, non-verbal, use a device?)	
Do they understand danger? YES <input type="checkbox"/> NO <input type="checkbox"/>	Understanding of Danger (Water) No Concept <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Understands Danger		Understanding of Danger (Cold) No Concept <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Understands Danger
Understanding of Danger (Heat) No Concept <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Understands Danger		Understanding of Danger (Traffic) No Concept <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Understands Danger	
Understanding of Danger (Heights) No Concept <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Understands Danger		Understanding of Danger (Strangers) No Concept <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Understands Danger	
Understanding of Danger (Fire) No Concept <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Understands Danger		Trust in Police No Concept <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Understands Danger	
<b>Person Filing Report</b>			
Name:		Date of Birth:	Relationship:
<b>Parent or Guardian Information</b>			
Name:		Date of Birth:	
Address:		Telephone:	
Name:		Date of Birth:	
Address:		Telephone:	
Additional Information: _____ _____ _____			
<b>Investigating Officer</b>			
Officer:	Badge:	Date:	Time:

I have read the above information and find it to be the best of my knowledge. I understand that I may be charged under provisions of C.G.S. 53a-157 for intentionally making a false report.

Signed: \_\_\_\_\_ Witness: \_\_\_\_\_

Subscribed and sworn to before me, this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

Signed: \_\_\_\_\_