



POLICE DEPARTMENT

Adrian J. Bump
CHIEF OF POLICE

MISSING ADULT REPORT

Case # _____
DATE/TIME PERSON NOTICED MISSING _____ DATE/TIME REPORTED _____

MISSING PERSONS NAME (First, Middle, Last) _____ HOME ADDRESS _____

RACE _____ SEX _____ AGE _____ DOB _____ HT _____ WT _____ HAIR _____ EYES _____ SS # _____

EMPLOYER _____ POSITION/TITLE _____ ADDRESS _____ PHONE # _____

LAST SEEN WEARING:

SCARS/BIRTHMARKS/TATTOOS/PIERCING/BRACES:

OTHER IDENTIFYING FACTORS:

MODE OF TRAVEL: _____ VEHICLE YEAR: _____ MAKE: _____ MODEL: _____ LICENSE: _____

COLOR: _____ OTHER DISTINGUISHING CHARACTERISTICS: _____

REASON PERSON LEFT: _____

HAS PERSON WENT MISSING BEFORE? ___ NO ___ YES Times reported to police? _____ Not reported to police? _____

IN THE PAST NINETY (90) DAYS HAVE YOU NOTICED OR SUSPECTED ANY OF THE FOLLOWING ABOUT MISSING PERSON?
(Check all that apply)

___ Skipping Work ___ Change of Friends ___ Change in Music Tastes
___ Withdrawn ___ Change in Behavior ___ Change in Dress Style
___ Change in Personality ___ Alcohol or Drug Use ___ Prescription Medications
___ Tired A Lot ___ Suicidal ___ Mental Health Issues
___ Other Concerns: _____

LISTS OF PLACES PERSON FREQUENTS:

1: _____

2: _____

3: _____

LISTS OF FRIENDS OR ASSOCIATES (NAME, ADDRESS AND PHONE NUMBER)

1: _____

2: _____

3: _____

SOCIAL MEDIA SITES FREQUENTED: _____

PERSONS CELL PHONE #: _____ **CARRIER:** _____ **EMAIL:** _____

MISSING PERSON CERTIFICATION

In order to assure that the right of privacy of individuals will not be violated, the National Crime Information Center (NCIC) requires that the law enforcement agency have in its possession written documentation certifying that one of the three following conditions exist prior to entering a missing person into the NCIC Records:

(REPORTING PERSON: CIRCLE & INITIAL BELOW ANY/ALL THAT APPLY)

1. The person being reported missing is under proven physical/mental disability or is senile, thereby subjecting himself/herself or others to personal and imminent danger.
2. The person being reported missing is missing under circumstances indicating that the disappearance was not voluntary.
3. The person being reported missing is in the company of another person under circumstances indicating that his/her safety is in danger.

I hereby declare and understand that the information listed in this report will be entered into Police Information Computer Systems and any agency making an inquiry of these computers will receive a reply that the person is missing and/or endangered.

I certify that the above information is true and correct. I also accept responsibility to notify Fort Atkinson Police if/when the person returns or is located by other means than law enforcement.

Reporting Persons Full Name

Relationship to Missing Person

Address

Phone Number(s)

Signature of Reporting Person

Date

Signature of Officer

Date

Entered NCIC Y / N Date Entered: _____ Entered By: _____

NCIC Cancellation Date: _____ Cancelled By: _____

Silver Alert Qualified Y / N Green Alert Qualified Y / N Crime Alert Sent Y / N Crime Alert Cancellation Date: _____