

Missing/Found Report



GUIDANCE NOTES

The Missing/Found Report Form collates all known personal information of a person who has been found or reported missing. It also shows details of the first informant and the person he or she was reunited with.

At no time should contact with the first informant be lost.

On initial report of the child missing – gather all relevant information and relay to your operational base or Central Point of Contact (CPC).

DO NOT BROADCAST FULL NAMES OF MISSING / FOUND PERSONS OVER THE RADIO

Only when Emergency Services become involved should an Incident Report form be completed and recorded as a SEARCH. This form should be attached to the Incident Report form in these circumstances.

If there is any reason for concern regarding the welfare of the missing person, the search should be escalated by contacting HMCG immediately.

Please ensure the volunteer box is ticked when a volunteer has been involved.

COPY DISTRIBUTION

1. Original copy to be sent to issuing authority
2. Senior Officer Copy
3. Remain at Facility

DATA PROTECTION ACT 1998

The personal information collected on this form will be held by the issuing authority. It will be held in compliance with data protection legislation and will be used for the purpose of identifying training needs and insurance liabilities. Where necessary it may be disclosed to other Emergency Services, Local Authorities and Lifesaving Organisations.

TO ENSURE MULTIPLE COPIES PLEASE COMPLETE IN PEN AND ON A HEARD SURFACE

Missing Persons Report Found



Area:	Location:	U.I.I.N.: (if applicable)
Date: __/__/__	Time reported to Lifeguard: (24hr) __:__	

Person Details		
Full Name:		
Post Town:	Post Code	Male <input type="checkbox"/> Female <input type="checkbox"/>
Age:	Time Last Seen: (24hr) __:__	Place Last Seen:

Narrative of Incident

Person Description	
Hair colour:	Height:
Clothing:	Other:

Details of person reunited with	
Time missing person found: (24hr) __:__	Time reunited: (24hr) __:__
Location:	
Name of person reunited with:	Relationship:
Signature:	

Name:	Signature:	Volunteer <input type="checkbox"/>
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