Dispatch
Abducted/Missing/Runaway Person Worksheet

☐ Caller Information
  ☐ Name _________________________________
  ☐ Address _________________________________
  ☐ Phone _________________________________ Cell _______________

☐ Establish Abducted, Missing or Runaway
  ☐ Did you see someone take the person?
  ☐ Person is not where they indicated they would be?
  ☐ Did the person run away?

☐ Abducted:
  ☐ Description of Suspect
    ☐ Name _________________________________
    ☐ Sex _________________________________
    ☐ Race _________________________________
    ☐ Height _________________________________
    ☐ Weight _________________________________
    ☐ D.O.B. ________________________ Age __________
    ☐ Hair Color ________________________ Style __________
    ☐ Eye Color ________________________ Glasses/Contacts __________
    ☐ Clothing _________________________________

  ☐ Any Weapons Seen _________________________________

☐ Description of Vehicle
  ☐ Make _________________________________
  ☐ Model _________________________________
  ☐ License _______________________ State __________
  ☐ Body Style _________________________________
  ☐ Color _________________________________
  ☐ Year _________________________________
  ☐ Other _________________________________

☐ Direction of Travel
  ☐ Street ________________________ Direction __________
Dispatch
Abducted/Missing/Runaway Person Worksheet

☐ MISSING
☐ Runaway
☐ Injured
☐ Endangered Runaway
☐ Lost
☐ Non Family Abduction
☐ Family Abduction

☐ Description of Person
☐ Name _________________________________
☐ Sex _________________________________
☐ Race _________________________________
☐ Height _________________________________
☐ Weight _________________________________
☐ D.O.B. ____________________ Age ____________
☐ Hair Color ____________________________ Style __________________
☐ Eye Color ____________________________ Glasses/Contacts __________________
☐ Clothing _________________________________

☐ Last Seen When______________________________
Where ______________________________________

☐ Additional Special Considerations: _________________________________
☐ Medical/Mental Health Needs: _________________________________
☐ Wander or bolt from safe environment
☐ Where would they go? _________________________________
☐ High Risk Behavior: ie. Seeking Water / Active Roadways
☐ Elude or Hide from search teams
☐ Conceal (small / tight enclosures) themselves from search team
☐ Child can respond to rescuers? _________________________________
☐ Where does the child like to go? _________________________________

☐ Caller Information
☐ Name _________________________________
☐ Address _________________________________
☐ Phone _______________Cell_______________

STAY AND WAIT TO TALK WITH AN OFFICER I’M SENDING ONE TO HELP YOU NOW!
Other Considerations

☐ Dispatch District Car to Caller

☐ Dispatch Other Available Units to Other Locations
☐ __________________________
☐ __________________________

☐ Notify Supervisor & Manager on Call

☐ Contact Madison Metro & Van Galder

☐ Contact Local Cab Companies
☐ Badger Cab
☐ Madison Taxi
☐ Union Cab

☐ Monitor Ongoing Communications

☐ Broadcast ATL on UW Channels

☐ Advise Dane County Communications Center

☐ Send Amber Alert Information to Dane County Communications Center
☐ Fax Paperwork
☐ TIME System
☐ Other
Appendix J

Police Patrol & Health Sciences Complex
Abducted/Missing/Runaway Person Worksheet

☐ Date: _______________  Time: _______________  Case # __________________

☐ Reporting Person
☐ Name
☐ Reporting Address
☐ Home Address
☐ Phone  Cell
☐ D.O.B.  Relationship

☐ Type of Incident
☐ Missing
☐ Runaway
☐ Injured
☐ Endangered Runaway
☐ Lost
☐ Non Family Abduction
☐ Family Abduction

☐ Description of Suspect
☐ Name
☐ Address
☐ Phone  Cell
☐ Sex  Race
☐ Height  Weight
☐ D.O.B.  Age
☐ Hair Color  Style
☐ Eye Color  Glasses/Contacts
☐ Clothing - Hat  Shirt
☐ Jacket  Pants
☐ Footwear  Other
☐ Any Weapons Seen
☐ Relationship to Victim
☐ Picture

☐ Description of Vehicle
☐ Make
☐ Model
☐ License  State
☐ Body Style
☐ Color
☐ Year
☐ Other

☐ Direction of Travel
☐ Street  Direction
Appendix J

**Police Patrol & Health Sciences Complex**

**Abducted/Missing/Runaway Person Worksheet**

<table>
<thead>
<tr>
<th>Description of Person/Victim</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name _________________________</td>
</tr>
<tr>
<td>Address ______________________</td>
</tr>
<tr>
<td>Phone ___________ Cell ___________</td>
</tr>
<tr>
<td>Sex __________________________</td>
</tr>
<tr>
<td>Race __________________________</td>
</tr>
<tr>
<td>Height _________________________</td>
</tr>
<tr>
<td>Weight _________________________</td>
</tr>
<tr>
<td>D.O.B. ___________ Age ___________</td>
</tr>
<tr>
<td>Is Missing person 65 YOA or older? ___________</td>
</tr>
<tr>
<td>Do they suffer from Alzheimers / Dimentia? ___________</td>
</tr>
<tr>
<td>Silver Alert Activation? ___________</td>
</tr>
<tr>
<td>Mental Health / Welfare Concerns? ___________</td>
</tr>
<tr>
<td>Hair Color __________________ Style ___________</td>
</tr>
<tr>
<td>Eye Color ___________ Glasses/Contacts ___________</td>
</tr>
<tr>
<td>Clothing - Hat ___________ Shirt ___________</td>
</tr>
<tr>
<td>Jacket ___________ Pants ___________</td>
</tr>
<tr>
<td>Footwear ___________ Other ___________</td>
</tr>
<tr>
<td>Other ___________</td>
</tr>
<tr>
<td>Any Weapons Seen ___________</td>
</tr>
<tr>
<td>Relationship to Victim ___________</td>
</tr>
<tr>
<td>Picture ___________</td>
</tr>
<tr>
<td>School ___________ Grade ___________</td>
</tr>
<tr>
<td>Last Seen - When ___________ Where ___________</td>
</tr>
<tr>
<td>With Whom ___________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Children with Special Needs (Autism)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the child carrying / wearing any tracking technology / Cell Phone? If so, which one and how can information be accessed? ___________</td>
</tr>
<tr>
<td>Is the child attracted to water? Can they swim? ___________</td>
</tr>
<tr>
<td>Is the child attracted to roadways / highways? ___________</td>
</tr>
<tr>
<td>Does the child have a fascination with vehicles, i.e. trains, heavy equipment, airplanes or fire trucks? ___________</td>
</tr>
<tr>
<td>Has the child wandered away before? Where were they found ___________</td>
</tr>
<tr>
<td>Where does the child like to go? Does the child have a favorite place? ___________</td>
</tr>
<tr>
<td>Is the child nonverbal? How will the child likely react to his or her name being called? ___________</td>
</tr>
<tr>
<td>Will the child respond to a particular voice such as that of his or her mother, father, relative, caregiver or family friend? ___________</td>
</tr>
<tr>
<td>Does the child have a favorite song, toy or character? If so, what or who is it? ___________</td>
</tr>
<tr>
<td>Does the child know their name, phone number or address? ___________</td>
</tr>
<tr>
<td>Does the child have specific dislikes, fears or behavioral triggers? ___________</td>
</tr>
</tbody>
</table>
Appendix J

☐ How might the child react to sirens, helicopters, airplanes, search dogs, people in uniform, or those participating in a search team?

☐ How does the child respond to pain or injury?_________________________________________________________________________________________

☐ What is the child’s response to being touched?_________________________________________________________________________________________

☐ Does the child wear a medical ID tag?_______________________________________________________________________________________________

☐ Does the child have any sensory, medical or dietary issues or requirements?

☐ Does the child rely on any life-sustaining medications?_______________________________________________________________________________

☐ Does the child become upset easily? If so, what methods are used to calm him or her?_______________________________________________________________________________________________

☐ Parent/Guardian Information

☐ Name___________________________________________________________________________________________________________________________

☐ Reporting Address_______________________________________________________________________________________________________________________________________________________________

☐ Home Address_______________________________________________________________________________________________________________________________________________________________

☐ Phone___________________Cell_____________________________________________________________________________________________________

☐ D.O.B.__________________Relationship__________________________________________________________________________________________

☐ Family Structure (ie: Married, Divorced,)_______________________________________________________________________________________

☐ Name___________________________________________________________________________________________________________________________

☐ Reporting Address_______________________________________________________________________________________________________________________________________________________________

☐ Home Address_______________________________________________________________________________________________________________________________________________________________

☐ Phone___________________Cell_____________________________________________________________________________________________________

☐ D.O.B.__________________Relationship__________________________________________________________________________________________

☐ Family Structure (ie: Married, Divorced,)_______________________________________________________________________________________

Notes:

Police Patrol & Health Sciences Complex
Abducted/Missing/Runaway Person Worksheet

☐ Other Considerations Health Sciences Center

☐ Posts

☐ Security Office Main Desk

☐ Main Entrance

☐ Clinics Entrance
Appendix J

- Emergency Department Exits
- First Floor Exits
- Roving Patrol

**Contacts**
- UWPD Dispatch
- UWHC Security
- Parking Booths
- VA Police
- Waisman Center
- Rennebohm
- HSLC

**Other**
- Cameras
- Review Applicable Policies

**Other Considerations Police**

**Supervisor Notification**
- If Child under 12 years of age
- Child is disabled
- Child is suicidal
- Involves criminal activity
- Any other unusual activity

**Amber Alert Criteria**
- Law Enforcement confirmation of an abduction
- Sufficient descriptive information about victim and suspect
- Age of child is 17 or younger
- Child entered into NCIC/CIB files
- Risk of serious bodily injury or death to include serious medical conditions

**Searches**
- Residence (Don’t take word of family that this was done
- Common routes to/from school/work/friends
- School building and grounds
- Neighborhood and local parks
- Notes (garbage, schoolbooks, computers)
- Any signs of abusive home setting
- Obtain a list of destinations/locations frequented

**Police Patrol & Health Sciences Complex**

Abducted/Missing/Runaway Person Worksheet

**Interviews**
- Friends
- Relatives
- Siblings
- Playmates
Appendix J

☐ Employees
☐ Co-Workers
☐ Neighbors
☐ Teachers

☐ Other
☐ Prior history of missing or does this differ from a set pattern /behavior
☐ Any recent punishments or fear of punishment
☐ Any mental health/emotional concerns
☐ Any drug use/abuse
☐ Internet Access: Email, Social Networks, Chat rooms, etc.
☐ Surveillance Cameras in the area.

Notes:
Supervisor
Abducted/Missing/Runaway Person Worksheet

☐ Review Officer checklist to determine if a comprehensive search is needed

☐ Comprehensive search shall include
  ☐ Establish a command post near search area (not residence)
  ☐ Implement Incident Command
  ☐ Liaison with family
  ☐ Brief Media
  ☐ No unauthorized personnel at command post
  ☐ Relief/breaks for search teams

☐ Maps of area
  ☐ Scope and direction plotted
  ☐ Direct search team(s) after each check in

☐ Documentation
  ☐ All Leads
  ☐ Investigative efforts
  ☐ Areas searched
  ☐ Other pertinent info

☐ Search Teams
  ☐ Can be a combination of Police, non-sworn, and volunteers
  ☐ Under direction of a police officer if possible
  ☐ Desirous to have 4 personnel assigned to each team

☐ Team #1 __________________________________________
  __________________________________________
  __________________________________________

☐ Team #2 __________________________________________
  __________________________________________
  __________________________________________

☐ Team #3 __________________________________________
  __________________________________________
  __________________________________________

☐ Team #4 __________________________________________
  __________________________________________
  __________________________________________
Supervisor
Abducted/Missing/Runaway Person Worksheet

Resources

☐ UWPD
☐ MOC Notified
☐ On-duty police
☐ On duty security
☐ Off duty personnel
☐ K-9 units
☐ Mounted units
☐ Bicycle patrol
☐ Database Checks
  ☐ Lexis/Nexis, Accurint, public records databases
  ☐ Travel / Financial Records

☐ UW Resources
☐ Parking Department
☐ Physical Plant
☐ Lake Safety
☐ Grounds
☐ Air Support (Med Flight)
☐ Housing (students)

☐ Other Resources
☐ Madison Police
☐ Shorewood Hills Police & Fire Departments
☐ Madison Fire Department
☐ Cab Companies
☐ Madison Metro/Van Galder
☐ Civilian volunteers
☐ Federal Bureau of Investigation
☐ Wisconsin State Patrol
☐ Capitol Police
☐ Child Abduction Response Team (CART) – WI DOJ
☐ Wisconsin Crime Alert Network
☐ Statewide Traffic Operations Center (STOC) – DOT
☐ Facebook – Social Media

☐ International
☐ Office of Children’s Issues (OCI) – US Department of State
  1-888-407-4747 or 1-202-501-4444
☐ INTERPOL
  1-202-616-9000
☐ Bureau of Diplomatic Services (DS) – Passport Fraud
  1-571-345-2973
Appendix J

The National Center For Missing & Exploited Children (NCMEC)
1-800-843-5678

Wisconsin Clearinghouse for Missing & Exploited Children
1-608-266-1671

A Child is Missing Alert – Reverse 911 Neighborhood-Alert
www.achildismissing.com
954-763-1288  888-875-2246

The National Center For Missing Adults
1-800-690-FIND

Resources they provide
- Technical assistance
- Photograph/poster preparation
- LOCATER
- Age Enhancement/Identification services
- Queries and data base services
- Expert investigative on site assistance
- Special Case Unit
- Forensic services

Issued 05/08
Reviewed 12/11
Reviewed 12/12
Reviewed 04/14
Revised 11/17

STANDARD: CALEA 41.2.5, 41.2.6