SAFER WALKING PROFILE

Profile for the person at risk

The purpose of this form is to record information about the person you care for. This will be used by the Police and search teams in the event that the person goes missing.

Once completed please keep this questionnaire in a safe place and give it to the Police in the event of an emergency. This information will help the search teams to gather all the relevant information and begin searching.

Recording this information ahead of time and keeping it regularly updated will greatly reduce stress associated with trying to recall detailed information in an emergency situation.

If the person you care for goes missing, ring 111 without delay, complete as best you can the 'Missing Now' section and hand to Police when they attend your location.

Background

First name

Last name / family name

Known as / nickname

First spoken language

Mobile phone number

Please attach a recent photo here.

Please find one that is up to date and a good likeness of the person.

Do they have a Wander pendant / GPS tracker? If yes, give details

Current address

Living here since

Physical Description

Date of birth / age

Gender

Build

Race / ethnicity / complexion

Height

Weight

Marks / scars / tattoos

Hair colour / cut

Eye colour / glasses

Other distinctive feature (e.g. facial hair)

Medical History

Medical conditions

Communication difficulties

Physical impairments

Vital medication	Frequency	Symptoms if missed

GP's name, address and telephone number

Information for searchers (e.g. scared of being touched, things that make me anxious, scared of dogs, etc.)

Life History (use 'Additional information' space at the end if required)

All occupations / hobbies / passions / interests / volunteer work

All favourite place(s) to spend time

Typical modes of travel (bus pass etc.)

All favourite / likely destinations

All favourite footpaths / tracks

Family or friends living nearby

Question	Answer
How easily can the person walk?	
If walking, how far can they get before becoming tired?	
Do they use a stick or other walking aid?	
How might they react to being upset or scared?	
Are they able to drive?	
Do they have a car?	
Church / mosque / synagogue / temple?	
Houses / friends who they visit?	

Life History (continued)

All previous addresses

Approximate dates

All work / school name and addresses *(please use extra pages if necessary)*

Approximate dates

If missing previously, where found

Circumstances: How found / how far / time missing

Additional information

Carer/Family Information

Your name

Relationship to person reported missing

Address

Home phone number

Mobile phone number

Alternative contacts (guardian / social worker)

Missing now

Time last seen

Place last seen

Medication last taken

Clothing

Car details / carrying anything / have cash or bank cards

Situation / recent discussion / recent notable date / contact with friends or family

Any other information