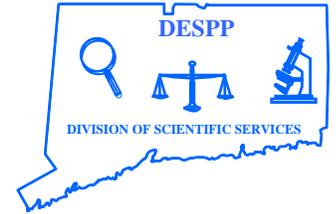




STATE OF CONNECTICUT

DEPARTMENT OF EMERGENCY SERVICES and PUBLIC PROTECTION DIVISION OF SCIENTIFIC SERVICES



Guy M. Vallaro, Ph.D.
Director

Laboratory #: _____

Additional Information Required for Requests for Missing Persons Testing

To better facilitate the processing of Missing Persons cases, please provide the following information in addition to the case summary described on the DESPP Request for Examination of Physical Evidence. Please submit this form at the time of evidence submission. A new form should be completed each time additional evidence is submitted.

Submitting Agency: _____ Agency Case #: _____

1) If available, please list the following:

- a. NamUs #: _____
- b. VICAP #: _____
- c. NCIC #: _____

2) Are other family members willing to submit a sample for DNA testing? If so, who are they and what relationship do they have to the missing individual?

- a. Name: _____ Relationship: _____
- b. Name: _____ Relationship: _____
- c. Name: _____ Relationship: _____

3) Please list any metadata specific to the corresponding category:

a. Unidentified person (age range/age at time of death, height, sex, ethnic group scars/marks/tattoos, date of recovery, location of recovery)

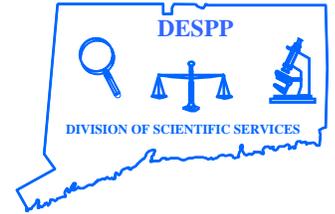
b. Missing person (date of birth, height, sex, ethnic group, scars/marks/tattoos, location of last contact to include city and state)

c. Biological relative (sex, ethnic group)



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4) If unidentified human remains are being submitted, has a full skeleton been recovered? (please check one)

Yes:

No:

N/A:

Requesting/Contact Person: _____ (print)

_____ (sign)

Phone #: _____