

**NYS DIVISION OF CRIMINAL JUSTICE SERVICES  
MISSING AND EXPLOITED CHILDREN CLEARINGHOUSE**

**FAMILY ABDUCTION CHECKLIST**

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**REPORTING PERSON INFORMATION**

Date: \_\_\_\_\_  Male  Female

Name : Last: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Zip Code: \_\_\_\_\_ Relationship To Child: \_\_\_\_\_

Telephone #: (Home/Work) (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Telephone #: (Cellular) (\_\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

If Applicable: Custody Decree:  Yes  No Court Name/Docket Number: \_\_\_\_\_

Do parents/guardians possess the child's fingerprints:  Yes  No Number of fingers:  2  10  Other

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**MISSING CHILD INFORMATION**

Name : Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Alias/Nickname: \_\_\_\_\_  Male  Female

Race: \_\_\_\_\_ DOB: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Physical Characteristics (e.g., glasses, scars, braces, tattoos): \_\_\_\_\_

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School District/Name/Grade: \_\_\_\_\_

Clothing Description: \_\_\_\_\_

Date/Time/Where Last Seen: \_\_\_\_\_

Describe any noticeable physical or mental abnormalities that the child may have. Please be specific. \_\_\_\_\_

Describe any medical problems that the child may have and any medications that he or she must utilize. \_\_\_\_\_

Describe any after school activities that the child participated in. \_\_\_\_\_

Describe the child's personality (e.g., friendly, outgoing, withdrawn, shy.) \_\_\_\_\_

Describe the child's general interests (e.g., sports, hobbies, music, reading.) \_\_\_\_\_

\_\_\_\_\_

Describe the relationship between the child and the abductor (e.g., close, distant.) \_\_\_\_\_

\_\_\_\_\_

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## **RELATIONSHIPS**

Describe the relationship between the child's parents (e.g., adversarial/amicable/violent). \_\_\_\_\_

\_\_\_\_\_

If known, describe the motivation for abduction. \_\_\_\_\_

\_\_\_\_\_

Was there an on-going or pending custody dispute?  Yes  No If yes, provide details. \_\_\_\_\_

\_\_\_\_\_

During any disagreement between the parents, did the abducting parent ever indicate that he or she would use the child(ren) as leverage (e.g., tried to get a child to take sides, threatened to take a child)  Yes  No If yes, provide details.

\_\_\_\_\_

\_\_\_\_\_

Has the abducting parent ever taken the child(ren) before?  Yes  No If yes, provide details (e.g., when, where, length of time missing, location while missing.)

\_\_\_\_\_

\_\_\_\_\_

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**ABDUCTOR INFORMATION**

The Abductor is: (Check all that apply)

- |                                     |   |   |
|-------------------------------------|---|---|
| <input type="checkbox"/> Mother     | <input type="checkbox"/> Maternal Grandmother | <input type="checkbox"/> Other Relative _____ |
| <input type="checkbox"/> Father     | <input type="checkbox"/> Paternal Grandmother |   |
| <input type="checkbox"/> Stepmother | <input type="checkbox"/> Maternal Grandfather |   |
| <input type="checkbox"/> Stepfather | <input type="checkbox"/> Paternal Grandfather |   |

Name : Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Alias: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Race: \_\_\_\_\_ DOB: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Social Security #: \_\_\_\_\_ POB: \_\_\_\_\_

Physical Characteristics (e.g., glasses, scars, braces, tattoos): \_\_\_\_\_

\_\_\_\_\_

Occupation (generally): \_\_\_\_\_

Specify any noticeable physical or mental abnormalities that the abductor may have. Please be specific. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Cite abductor's place of birth (municipality, state and country). \_\_\_\_\_

Specify all geographical areas that the abductor has expressed an interest in living. \_\_\_\_\_

\_\_\_\_\_

If the abductor has a regional or foreign accent, please describe. \_\_\_\_\_

\_\_\_\_\_

Describe any drug (including alcohol), mental or any other problems or dependencies the abductor may have.

\_\_\_\_\_

\_\_\_\_\_

Is the abductor prone to violence against the child(ren):  Yes  No Parent:  Yes  No

Is the abductor from a single parent home?  Yes  No

Was the abductor a victim of abuse as a child ?  Yes  No If yes, please provide details (e.g., abusers).

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Do you believe that there any possibility that any family members, friends or others are providing aid to the abductor (e.g. helping to hide the child(ren)).  Yes  No Identify all possibilities by name and location (continue on the back if necessary.)

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Specify the educational level of the abductor (e.g., grade school, high school graduate, college graduate). If known, include the names and addresses of all schools/colleges attended.

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Cite any skills, hobbies or general interests that the abductor may have (e.g., computer training, hunting, fishing, sports).

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Specify the type of employment last held by the abductor and the employer's name and address. \_\_\_\_\_

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Describe any deviant or bizarre behavior displayed by the abductor (e.g., sexually or physically abusive, violent, paranoid.)

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Describe the abductor's self-image (e.g., introvert/extrovert, timid/aggressive, strong/weak). \_\_\_\_\_

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Describe the type of vehicle that the abductor prefers to drive, including the type and manufacturer (e.g., sports car, pickup truck/Chevrolet, Toyota).

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Describe how the abductor generally interacts with the child(ren). \_\_\_\_\_

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Is the abductor religious?  Yes  No If so, provide details (e.g, religious affiliation.) \_\_\_\_\_

Describe the abductor's prior criminal history, if any. Specify arrest charges, locations and approximate dates. \_\_\_\_\_

Describe the abductor's career/life goals. \_\_\_\_\_

Describe the abductor's strengths and weaknesses (e.g., punctuality/tardiness, hard worker/lazy, neat/sloppy.)

Describe abductors financial resources and methods of payment (e.g., cash, credit cards, checks, loans.) Include the names and locations of any financial institutions (e.g., banks, credit card companies) that he or she used prior to the abduction. Note the type of account used in each institution and account numbers, if known.

Is it believed that there may be other individuals (e.g., new spouse with children from a previous relationship) traveling with the abductor and child(ren)?  Yes  No If yes, please identify all by name and provide as much information (e.g., dates of birth, ages, physical descriptions, occupations) as possible.

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### **ABDUCTOR VEHICLE INFORMATION**

Is there a vehicle involved  Yes  No If "Yes", provide the following descriptive information about vehicle:

Vehicle: Make: \_\_\_\_\_ Model: \_\_\_\_\_ Approximate Year: \_\_\_\_\_ Color: \_\_\_\_\_

Registration (License Plate) Number: \_\_\_\_\_ Registration (License Plate) State: \_\_\_\_\_ Special Identifiers: \_\_\_\_\_

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**INVESTIGATING LAW ENFORCEMENT AGENCY INFORMATION**

Name of Investigating Law Enforcement Agency: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Investigating Officer Name: \_\_\_\_\_ Telephone Number: (\_\_\_\_\_) \_\_\_\_\_

Describe the last viable leads that were investigated on this case. Include the dates and locations.

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\_\_\_\_\_  
\_\_\_\_\_

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**ADDITIONAL NARRATIVE/BACKGROUND INFORMATION**

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After completion, forward copies of this form and the "Authorization To Publicize - Missing Child/College Student" form to:

**NYS Division of Criminal Justice Services  
Missing and Exploited Children Clearinghouse  
4 Tower Place  
Albany, NY 12203**

**1-800-FIND-KID or (518) 457- 6326  
Fax # (518) 457-6965  
www.criminaljustice.state.ny.us**

**07/2003**