**REQUEST FOR SEARCH OF MISSING CHILDREN AND ADULTS**

**[USE BLUE INK] FOR BNNPADF V2024**

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| **Date case opened:** | | | **Code:** | | |
| **Classification:** | **Child** |  | | **Adult** |  |

**Block N°.**

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| **Origin of opening\*** | **Occupation** |  | **Family request** | **Referral by** | | | | **Cases referred by public or autonomous entities** |
|  |  |  | **CNB** |  | **CONABUSQUEDA** |  |  |

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| **I. INFORMATION ABOUT THE MISSING PERSON** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name** | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Known as** | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Adoptive name:** | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Sex** | **M** |  | **F** | |  | **Age at time of disappearance:**  \_\_\_\_ **years and \_\_\_\_\_ months old** | | | | | | | | | | | | | | | | | | | | |
| **Place of birth** | | | | | | **Department** | | | | **Municipality** | | | | **District** | | | | **Village (Cantón/ Barrio/ Colonia)** | | | | | | | | **Caserío/ Valle** |
|  | | | |  | | | |  | | | |  | | | | | | | |  |
| **Date of birth** | | | | | | **Day** | | | | **Month** | | | | | | | | **Year** | | | | | | | | |
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| **Place of birth according to adoption** | | | | | | **Department** | | | | **Municipality** | | | | **District** | | | | **Village (Cantón/ Barrio/ Colonia)** | | | | | | **Caserío/ Valle** | | |
|  | | | |  | | | | | | | |  | | | | | |  | | |
| **Date of birth according to adoption** | | | | | | **Day** | | | | **Month** | | | | | | | | **Year** | | | | | | | | |
|  | | | |  | | | | | | | |  | | | | | | | | |
| **Mother’s name** | | | | | | |  | | | | | | | | | | | | | | **Current age:** | | | | | |
| **Deceased:** | | | | | |
| **Father’s name** | | | | | | |  | | | | | | | | | | | | | | **Current age:** | | | | | |
| **Deceased:** | | | | | |
| **Identity Documents** | | | | | | **Birth Certificate Nº:** | | | | | | | | | | | | | | | | | | | | |
| **Department** | | | | | **Municipality** | | | | **Year:** | | | | **Book** | | | | | | **Page** | |
| **Passport nº:** | | | | | | | | | | **Identity Card nº:** | | | | | | | | | | |
| **Adoption Certificate Nº:** | | | | | | |  | | | | | | | | | | | | | |
| **Departament** | | | | | | **Municipality** | | | | **Year:** | | | | **Book** | | | **Page** | | | |
| **Passport Nº:** | | | | | | | | | | **Baptismal certificate in parish:** | | | | | | | | | | |
| **Marital Status:** | | | | | | | | | | | | | **Name of spouse or life partner:** | | | | | | | | | | | | | |
| **Number of children:** | | | | | | | | | | | | | **Alive:** | | | | | | | | | | | | | |
| **Deceased:** | | | | | | | | | | | | | |
| **Residential address at the time of disappearance:** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Current status of the partner:** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Knew how to read and write** | | | | | | Yes | | **School:** | | | | | | | | | | | | | | | | | | |
| No | | **Academic level:** | | | | | | | | | | | | | | | | | | |
| **Profession or occupation** | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Place of work** | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Group affiliation** | | | | **Religious** | | | | | **Social** | | | | | | | | **Political** | | | | | **State Agent** | | | | |
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| **II. DISAPPEARANCE DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Date** | | | | **Day** | | | | | | | | | | | | | | **Month** | | | | | | | | | | | | | | | | | | | | | | **Year** | | | | | | | | | | | | | | | **Time** | | | | | |
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| **Place of disappearance** | | | | **Departament** | | | | | | | | | | | | | | **Municipality** | | | | | | | | | | | **District** | | | | | | | | | | | | | | | **Village (Cantón/ Barrio/ Colonia)** | | | | | | | | | | | | **Caserío/ Valle** | | | | |
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| **Alleged perpetrator of the disappearance** | | | | **FAES** | | | | **FMLN** | | | | | | | | | | | | **Security Forces** | | | | | | | | | | | | | | | | | | | | | | | | | | | **Men dressed as civilians** | | | | | | | | | | | **Not determined [ND]** | | |
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|  | | | | **Responsible person, if identified:** | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Gestiones realizadas previamente** | | | **CICR** | | | | | | | | | | **Habeas Corpus** | | | | | | | | | | | | | | **Legal Guardianship of the Archdiocese** | | | | | | | | | | | | | | | | | | **Legal Aid** | | | | | | | | | | | | | **Non-governmental Human Rights Commission** | | |
| Case Nº: | | | | | | | | | | Case Nº: | | | | | | | | | | | | | | Case Nº: | | | | | | | | | | | | | | | | | | Case Nº: | | | | | | | | | | | | |  | | |
| **Truth Commission** | | | | | | | | | | | | | **Working Group on Enforced or Involuntary Disappearances** | | | | | | | | | | | | | | | | **CIDH** | | | | | | | | | **HHRR NGOs** | | | | | | | | | | | | **Security Forces** | | | | | | | |
| Case Nº: | | | | | | | | | | | | | Case Nº: | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | |
| **Hospitals** | | | | | | | | | **Prisons** | | | | | | | | | **CDHES** | | | | | | | | | | | | | | **Asociación Pro Búsqueda** | | | | | | | | | | | | | | **Otros** | | | | | | | | | | | |
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| **III. DESCRIPTION OF EVENTS [Account of the disappearance]:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **IV. ANTEMORTEM INFORMATION [Morphological description]** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Height: metres** | | | | | | | | | | | | | | | | | | | | | | | | | | **Weight: pounds** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Complexion** | | | | | **Slim** | | | |  | | | | | | | | | | **Athletic** | | | |  | | | | | | | | | **Obese** | | | | | |  | | | | | | | | | | **Medium build** | | |  | | | | | | **Robust** | | |  |
| **Skin color** | | | | |  | | | | | | | | | | | | | | | | | | **Moles or specific characteristics** | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |
| **Laterality:** | | | | | **Left-handed** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | **Right-handed** | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| **Eyes** | **Color:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Shape:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Hair Texture:** | | **Straight** | | | | | **Broken** | | | | | | | | | | | | | | | | | | **Curly** | | | | | | | | | | | | | | **Wavy** | | | | | | | | | | | | | **Other** | | | | | | | | |
| **Hair color:** | | **Black** | | | | | | | | **Brown** | | | | | | | | | | | | | | | **Blonde** | | | | | | | | | | | | | | **Red** | | | | | | | | | | | | | **Dyed** | | | | | | | | |
| **Nose Shape** | | **Aquiline** | | | | | | | | | | | | | | | **Narrow** | | | | | | | | | | | | | | | | | **Straight** | | | | | | | | | | | | | | | | **Wide** | | | | | | | | | | |
| **Chin Shape:** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Head Shape:** | | | | | | **Round** | | | | | | | | | | | | | | | | | | | | | | **Long** | | | | | | | | | | | **Square** | | | | | | | | | | | | | **Oval** | | | | | | | | |
| **Teeth:** | | **Color** | | | | | | | | | **Crown** | | | | | | | | | | | | | | | | | **Cavities** | | | | | | | | | | | **Size** | | | | | | | | | | | | | **Missing** | | | | | | | | |
| **Diseases:** | | | | | | | | | | | | | | | **Fractures:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Prosthesis/implants/surgeries:** | | | | | | | | | | | | | | | | | |
| **Description of clothing/items worn at the time of disappearance:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **V. WITNESSES OR INFORMANTS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name** | | | | | | | | | | | | | | | | | | | | | | | | **Address** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Status [Witness or Informant]** | | | | | | |
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| **VI. RELATIVES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name** | | | | | | | | | | | | | | **Family relationship** | | | | | | | | **Age** | | | | | | | | | **Nº DUI** | | | | | | | | | | | **Address** | | | | | | | | | | | | | | | | | **Date of DNA sample taken** | |
|  | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | |
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| **VII. DATA OF THE REPORTING PERSON.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name**: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Relationship to the missing person:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Type of identification document:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Identification document number:** | | | | | | | | | | | | | | | | | | | | | | | | |
| **Address of the reporting person:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **State/Country:** | | | | | | | | | | | | | | |
| **Contact Numbers:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Email address:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Signature of the reporting person:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Name and signature of the person responsible for opening of the case:** | | | | | | | | | | | | | | | | | | | | | | | |
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| **Name and signature of the person responsible for the search process:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| **VIII. ANNEXES [Presented documents]** |
| **Photographs:** |
| **Birth Certificates:** |
| **Testimonies/Declaration:** |
| **Habeas Corpus:** |
| **Press publications:** |
| **Other documents:** |