



## Missing Link Application/ Request Help Form

Name

Address

Phone Number

Email

Comment or Message

Relationship to Missing Person/Victim

Name of Missing Person/Victim

Date of Birth

Physical description of the Missing Person/Victim

Any tattoos or distinguishing features

Last Date Seen

Last Address Seen

Description of what the person was wearing

Any Current or Previous Substance or Perception used by the Missing Person/Victim

**Please list all who were living with the person and relationship**

**Please list persons partners name(s)**

**Have you reported this person missing to the police?**

**Have you signed a FOIA release at the police department**

**Please check which Missing Link services that you are interested in receiving  
(Choices are: Search, justice system support, counseling, pastoral support, and intuitive  
psychic support)**