



ICRC

TRACING REQUEST

ICRC No :

ICRC IN No :
DEL 23/00429

1. PERSON TO BE TRACED

Full name _____
(as expressed locally with surname/family name)

Spouse name _____

Also known as (nickname) _____

Father's full name _____

Mother's full name _____

Nationality _____

Ethnic origin / tribe _____

Date of birth (or age) _____

Place of birth / origin _____

Marital status _____

Gender: Male/Female/Others

Occupation/Profession _____

Last known address _____

Telephone/Mobile _____ e-mail _____

2. PERSON(S) ACCOMPANYING THE SOUGHT PERSON

Full name with surname/family name	Date of birth	Sex	Relationship with the sought person
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. DETAILS OF ENQUIRY

Date, details of last news and source of information (explain exact circumstances that led to the loss of contact)

Any step taken by the enquirer and result

Additional information that might help in enquiries (e.g. names and addresses of persons able to supply information – family, friends, religious leaders, business relations etc.)

4. ENQUIRER

Full name _____
(as expressed locally with surname/family name)

Spouse name _____

Also known as (nickname) _____

Father's full name _____

Mother's full name _____

Nationality _____ Ethnic origin / tribe _____

Date of birth (or age) _____ Place of birth / origin _____

Gender: Male/Female/Others _____

Full contact address _____

Telephone/Mobile _____ e-mail _____

The sought person is my _____

5. TRANSMISSIBILITY

5.1 Enquirer's personal data

To search for your missing relative, we might need to share some information about you:

5.1.1. Do you object to the sharing of your information with third parties for the search of your missing relative? [Please specify objections to the type of data (e.g. name, picture, contact details) and to whom (please refer to entities mentioned in the Information Notice)]

- No objection
- Total objection
- Partial objection

Please specify in case of partial objection

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.....

5.1.2. Do you object to the sharing of your personal data with the humanitarian organizations or social services¹? [Specify the type of data (e.g. name, picture, contact details) and to whom]

- No objection
- Total objection
- Partial objection

Please specify in case of partial objection

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5.1.3. Do you object to the publishing of your information in any of the types of media or formats explained to you?

[Please specify objections to the types of data that will be published (e.g. name, picture) and in what format (please refer to formats mentioned in the Information Notice, such as door to door search, etc)]

- No objection
- Total objection
- Partial objection

Please specify in case of partial objection

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¹ The organizations may vary depending on the context and geographical locations. Therefore, we have not listed the organizations and would be communicated to the enquirer by the staff/volunteers while collecting the case.

5.2. Sought person’s personal data

We might also need to share some information about your missing relative to help with the search:

5.2.1. Do you object to the sharing of the personal data of the sought person with the third parties we listed?

[Please specify objections to the type of data (e.g., name, picture, date and place of birth, parents’ names, last known location, circumstances of loss of contact) and to whom (please refer to entities mentioned in the Information Notice)]

- No objection
- Total objection
- Partial objection

Please specify in case of partial objection

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5.2.2. Do you object to the publishing of the personal data of the sought person in any of the types of media or formats explained to you?

[Please specify objections to the types of data that will be published and in what format: (please refer to formats mentioned in the Information Notice, such as door to door search, etc)]

- No objection
- Total objection
- Partial objection

Please specify in case of partial objection

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If the ENQ is a vulnerable person (e.g. a child), please track the opinion of the caregiver on transmissibility

If the ENQ is a child, please document on the best interest assessment, where conducted

5. ALTERNATIVE CONTACT (Optional)

Full name (as expressed locally)

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Father's full name.....

Nationality Telephone

Full contact address

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Objections

Objections possibly expressed by the alternative contact on the processing of his/her personal data:

- No objection
- Total objection

Place and date of enquiry _____

Request taken by (name) _____ Branch/Office/Delegation _____