



MONT VERNON POLICE DEPARTMENT



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Chief of Police

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Persons with Developmental Disabilities Checklist for First Responders

Complete the form and return to the Mont Vernon Police Department via e-mail or in person

Name of individual: _____ Nickname: _____

Address: _____

DOB: _____ Phone #: (H) _____ (C) _____

Sex: _____ Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

Identifying Scars/ Marks/ Tattoos: _____

Parent's Name (If child): _____

Primary contact: _____ Phone: _____

Primary contact's relationship: _____

Alternate contact: _____ Phone: _____

Alternate contact's relationship: _____

Alternate contact: _____ Phone: _____

Alternate contact's relationship: _____

Does patient carry identification: ___ Yes ___ No: If so, what type: _____

Does individual have a driver's license: ___ Yes ___ No: If yes, driver's license # _____

Does individual own a vehicle: ___ Yes ___ No: If yes, vehicle make: _____

Vehicle model/ year/ color: _____ Plate #: _____

Method of Communication, if non-verbal: _____

Has individual wandered in the past: ____ Yes ____ No: If so, any particular destination(s): ____

Best method to approach individual and de-escalate if he/she is excited or upset? _____

Additional medical issues (Ex: Diabetes, cancer, etc.): _____

Does individual have history of being harmful or threatening to themselves or others (verbally or physically): ____ Yes ____ No ____ If so, please describe: _____

Is individual agitated or disoriented by lights, sirens, sudden lights or sounds: ____ Yes ____ No
Please provide additional information about potential triggers here, if needed: _____

Any calming techniques (Ex: getting a snack, talking about a topic of interest, etc.): _____

Any other helpful information we should be aware of: _____

Relationship and contact information of person completing this form: _____

****Along with this form, please attach an updated photo of the individual****

I, _____ give my permission to the Mont Vernon Police Department to retain this information, to be kept in strict confidence. This information will be used in response to emergency calls (including missing/found person incidents).