



# TOWAMENCIN TOWNSHIP POLICE DEPARTMENT



Paul T. (Tim) Dickinson  
Chief of Police

1090 Troxel Road PO Box 303 Kulpville PA 19443  
(215) 368-7606 (office) / 215-368-7624 (fax)

## L.O.C.A.T.E. – Law Officers Concerned About The Endangered Person With Special Needs Form

Name of Individual with Special Needs: \_\_\_\_\_

Their Address: \_\_\_\_\_

Current Physical Description:

Age: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Nickname(s): \_\_\_\_\_

Scars/Marks/Tattoos/Identifying Features: \_\_\_\_\_

Significant Medical/Psychological Condition(s): \_\_\_\_\_

ID Information: Do they carry or wear jewelry, tags, identification cards? \_\_\_\_\_

Emergency Contact Information:

Name of Parents or Care Providers: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Alternative Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Sensory or Dietary Concerns: \_\_\_\_\_

Is he/she likely to wander off or run away? \_\_\_\_\_

Places they like to visit: \_\_\_\_\_

Behaviors or Characteristics that may attract attention: \_\_\_\_\_

Toys, Objects, Animals, or Topics (include likes and dislikes): \_\_\_\_\_

Approaching, Calming, or De-escalating techniques most likely to work: \_\_\_\_\_

Method of communication if non-verbal (sign language, picture board, written words): \_\_\_\_\_

Any additional pertinent information: \_\_\_\_\_

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