

**NATIONAL ALERT**

**NOTIFICATION OF A MISSING CHILD**

**CHILD/YOUNG PERSON’S DETAILS:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Family Name** | **Given Name** | **DOB/EDD** | **Gender (Male/Female/Unborn)** |
|  |  |  |  |

|  |  |
| --- | --- |
| **Address** |  |
|  |  |  |  |
| **Postcode** |  | **Telephone:** |  |
|  |  |  |  |
| **Reasons for Alert****Background****Current Concern****Plan** |
| **If child is located, please contact Kent Specialist Children’s services on:**  |
| **Name:** **Designation:** **Tel Number:** **Or outside office hours:**  |  |
| **Person notifying:****Designation:** |  |

|  |  |
| --- | --- |
| **Date:**  |  |