

NATIONAL MISSING PERSONS PROGRAM

University of North Texas Center for Human Identification
 3500 Camp Bowie
 Fort Worth, Texas 76107
 1-800-763-3147
 www.unthumanid.org
 missingpersons@unthsc.edu

UNTCHI Case No.: _____

Unidentified Human Remains Submission Form

Submitting Agency

Submitting Agency: _____ Agency Case No.: _____
 Address: _____ ORI No.: _____
 _____ ME/ Coroner No.: _____
 _____ (If different from above)
 _____ NCIC No.: _____
 _____ NamUs No.: _____
 Contact Name: _____ Phone No.: _____ Fax No.: _____
 E-mail Address: _____
 Submitting agency's shipping account (for return shipment of remains unless other arrangements have been made)
 Shipping Company: _____ Account Number: _____

Investigating Agency

Complete this section if the investigating agency is different from the submitting agency.
 Agency: _____ Agency Case Number: _____
 Address: _____

 Contact Name: _____ Phone No.: _____ Fax No.: _____
 E-mail Address: _____

Evidence Submitted

LAB NO.	ITEM NO.	QUANTITY	DESCRIPTION
To Be Entered by UNTCHI			

Chain of Custody (Required)

Released by: _____
 Signature Printed Name Date & Time Released
 Released to: _____
 Courier Tracking Number
 Received by: _____
 Signature Printed Name Date & Time Received

NATIONAL MISSING PERSONS PROGRAM

University of North Texas Center for Human Identification

3500 Camp Bowie

Fort Worth, Texas 76107

1-800-763-3147

www.unthumanid.org

missingpersons@unthsc.edu

UNTCHI Case No.:

Associated Case Information

Complete this section if you have any information regarding the possible identity of the unidentified remains.

Name of Missing Person: _____

Investigating Agency: _____ Agency Case Number: _____
for the missing persons case)

NamUs No.: _____ NCIC No.: _____

Have reference samples for the missing person been previously submitted to CODIS? Yes No

Are reference samples being submitted at the same time as this unidentified remains sample? Yes No

Unidentified Human Remains Related Information

Leave fields blank for sex, age, race and height if that information has not been determined.

Sex of Remains: Male Female Unknown

Approximate Age: _____ Approximate Height: _____ Race: _____

Physical Identifiers (scars, tattoos, medical devices, etc.): _____

Date remains found: _____

Location where remains found (Include City and State): _____

Medical Examiner, Forensic Anthropologist, and Investigator Reports

The information found in investigative reports is often critical in the CODIS identification process. Using this data, potential associations may be included or excluded. For skeletal cases, a forensic anthropological analysis is recommended and a report can be provided at no cost to your agency. If you have questions regarding the submission of remains for an anthropological report, please call the Laboratory of Forensic Anthropology at 940-565-4335 or 800-279-1339. For all other submission questions contact the evidence custodian at 1-800-763-3147.

Please Indicate the Reports Included with this Submission:

Medical Examiner/Forensic Pathologist

Forensic Anthropologist

Investigator (Sheriff, Police Department, etc.)

Forensic Odontologist (Dental Records)

NOTE: These reports are treated as confidential documents.

NATIONAL MISSING PERSONS PROGRAM

University of North Texas Center for Human Identification

3500 Camp Bowie

Fort Worth, Texas 76107

1-800-763-3147

www.unthumanid.org

missingpersons@unthsc.edu

UNTCHI Case No.:

Submission of Unidentified Human Remains for Anthropological Analysis

NOTE: Complete this page when submitting skeletal remains for anthropological analysis in addition to DNA database submission. A separate forensic anthropology report will be sent to your office. Please submit all recovered remains and associated case information.

Associated Items Submitted:

Scene Photographs	<input type="checkbox"/>	Clothing	<input type="checkbox"/>
Medical Examiner Report	<input type="checkbox"/>	Insect Material	<input type="checkbox"/>
Police Report	<input type="checkbox"/>	Prior Anthropological Report	<input type="checkbox"/>
Dental Reports/Charting	<input type="checkbox"/>	Other (describe below)	<input type="checkbox"/>

Description of remains submitted: (Briefly describe the following if not included in the agency's scene report and materials.)

Describe recovery context (burial, surface scatter, submerged, etc.):

Describe the recovery environment (near water, desert, brush, etc.):

Was any clothing present/recovered at the scene? Yes No (If yes, please describe)

Additional Information

Has any skeletal material been removed for DNA analysis? Yes No (If yes, describe the material removed and where it was sent)

Has any skeletal material been retained by the submitting agency? Yes No (If yes, describe the material retained and not submitted)

NATIONAL MISSING PERSONS PROGRAM

University of North Texas Center for Human Identification

3500 Camp Bowie
Fort Worth, Texas 76107
1-800-763-3147
www.unthumanid.org
missingpersons@unthsc.edu

UNTCHI Case No.:

Unidentified Human Remains Fax Back Tracking Form

Complete This Form Immediately after Shipping and Fax To The Following Number:

800-221-3515

Submitting Agency: _____

Agency Case No.: _____ NCIC No.: _____

NamUs No.: _____ ORI No.: _____

Contact Person: _____

Phone Number: _____ Fax: _____

E-mail Address: _____

Date Shipped: _____ Courier: _____

Tracking Number: _____

Is the case also being submitted for anthropological analysis? Yes No

Notice: The information provided will be entered into a Unidentified Human Remains tracking database. The information will be matched to the UHR samples received from the courier. This fax will help to ensure that the testing facility is receiving all of the UHR samples sent.