



Layla's Hope

Building relationships, making connections, finding the lost to bring back hope!

A Program of Mental Health Transformation Alliance (MHTA) sjustiss.mhta@outlook.com 276,274,7068

YOUTH/YOUNG ADULT ID KIT

HOW TO USE THIS KIT

When searching for a missing/runaway youth/young adult, the most useful tools for law enforcement are an up-to-date, quality photograph and descriptive information. Complete this Missing Youth/Young Adult Kit by attaching a recent photograph and a list of all identifying and medical information. Update the photograph and information every 6 months, and keep the Kit in a secure, accessible location.

IF YOUR YOUTH/YOUNG ADULT IS MISSING SEARCH:

- Nearby Hospitals, Churches, Homeless Shelters And Libraries
- Outside Buildings
- Vehicles Including Trunks
- Friends And
 Acquaintances
- Check Out Social Media
- Closets

Hang Out Spots

- Any other place you feel they may be at.
- Immediately call your local law-enforcement agency and provide them with your up-to-date ID Kit.
- After you have reported your youth/young adult missing to law enforcement, if they are under the age of 18 call the National Center for Missing & Exploited Children® at 1-800-THE-LOST® (1-800-843-5678). If they are over the age of 21 register them with the National Missing and Unidentified Persons System (NamUs)

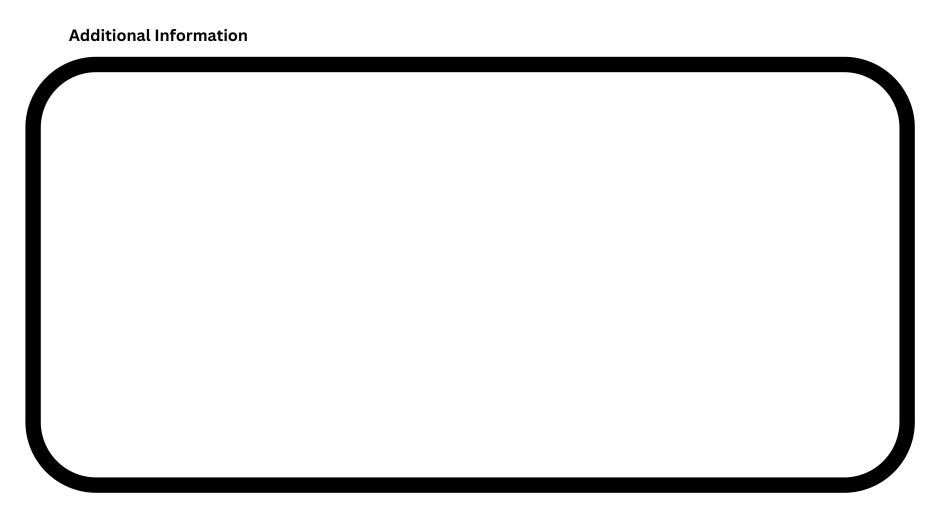
Place Photo	State: County:						
Here	Physical Characteristics						
	Sex: Male Female Transgender Male						
_	☐ Transgender Female ☐ Ot	her:	_				
	Race/Ethnicity:	Height	Weight	Dat			
ast Name:	Hair Color:						
-irst/Middle Name:	Hair Type:						
Nickname:	_ Eye Color:						
Date of Birth:	- Distinguishing Characteristics						
Hang Outs	Has/Wears:	races					
	Piercing Tattoos	_					
		Coloring					
	Special Needs:						
	 Other:						

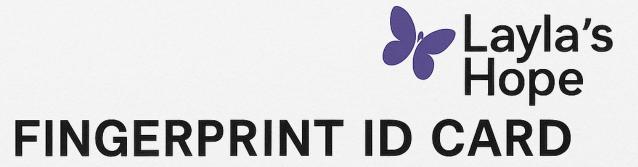
Personal Information

Address: _____

City: _____Zip:____

Medical Information			
Physicians Name:	Blood Type:		
Address:	Allergies/Conditions:		
Phone Number:	Medications:		
Emergency Contact(s)			
Name:	Name:		
Relationship:	Relationship:		
Phone Number:	Phone Number:		
Work Number:	Work Number:		
Friends/Acquaintances (use additional pages if needed)		
Name:	Name:		
Phone Number:	Phone Number:		
Address:	Address:		
Name:	Name:		
Phone Number:	Phone Number:		
Address:	Address:		





RIGHT THUMB	RIGHT INDEX	RIGHT MIDDLE	RIGHT RING	RIGHT LITTLE
LEFT THUMB	LEFT INDEX	LEFT MIDDLE	LEFT RING	LEFT LITTLE