1. **CASE INFORMATION**

|  |  |
| --- | --- |
| Date dd/mm/yyyy | Caseworker ID |

1. **TRACING SUMMARY**

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| --- | --- | --- | --- | --- | --- |
| Date of action | Type of Tracing - **please avoid editing drop down** | Person being traced - **please avoid editing drop down** | Detail of tracing action (specify purpose of tracing, in some cases it may not be for reunification as not possible but to create contact) | Outcome | Comments/ Next Steps |
| dd/mm/yyyy | * Referral to ICRC or Red Cross / Crescent * Referral to government agency * Referral to Police or Law enforcement * Referral to UN/NGO responsible for tracing, if yes specify \_\_\_\_\_\_\_\_\_\_\_ * Tracing through community networks or family * Tracing through media and communication (photo, mass tracing lists, etc) * Other, specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * Mother * Father * Previous caregiver, specify\_\_\_\_\_ * Brother * Sister * Grandmother and/or Grandfather * Aunt and/or Uncle * Other, specify:\_\_\_\_\_\_\_ |  | * Ongoing * Successful * Unsuccessful |  |
| dd/mm/yyyy | * Referral to ICRC or Red Cross / Crescent * Referral to government agency * Referral to Police or Law enforcement * Referral to UN/NGO responsible for tracing, if yes specify \_\_\_\_\_\_\_\_\_\_\_ * Tracing through community networks or family * Tracing through media and communication (photo, mass tracing lists, etc)   Other, specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * Mother * Father * Previous caregiver, specify\_\_\_\_\_ * Brother * Sister * Grandmother and/or Grandfather * Aunt and/or Uncle * Other, specify:\_\_\_\_\_\_\_ |  | * Ongoing * Successful * Unsuccessful |  |
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1. **AUTHORIZATION**

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| --- | --- | --- |
| Caseworker name | Date dd/mm/yyyy | Signature |