

**Inter-Agency Child Protection Information Management System - FTR Forms**  
**FULL REGISTRATION FORM FOR UNACCOMPANIED & SEPARATED CHILDREN**

**CONSENT FOR SHARING INFORMATION** (Please ensure the appropriate form is completed to get consent)

Is the child willing for their personal details (name, photo, etc) to be stored/shared?

Yes

No

**SECTION 1 - CHILD'S PERSONAL DETAILS**

Registration I/D Number  
 (Generated by database)

What is the child's "Separation" status?

Separated

Unaccompanied

PHOTO



Other I/D Number

NOTE: To be specified by the programme

Name of agency other ID Number is from

Population group

Refugee

Internally Displaced (IDP)

National (not displaced)

NOTE: To be determined by the programme

Protection concerns

Separated

Unaccompanied

CAAFAG

Disability

Missing/Abducted

NOTE: To be determined by the programme

Orphan

Girl Headed Household

Boy-Headed Household

Trafficked child

Migrant worker

In orphanage or other institutional care

Living/sleeping on the street

Worst forms of child labour

Not attending school

Detained

Deported

Substance Use

Seriously Injured

Seriously unwell

Adolescent mother/pregnant

Physically Abused

Sexually Abused

Sexually Exploited

HIV/Aids

T.B.

Other protection concerns

Additional comments

  


Child's Name

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| First Name           | Middle Name          | Last Name            |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Any name/s given after separation?

Yes

No

If yes give full name(s)

Other names & spellings child is known by

Sex

Male

Female

Age given by child

Age estimated by interviewer

Year of Birth

Nationality of child

Child's ethnic affiliation

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| Ethnic Affiliation1  | Ethnic Affiliation2  | Ethnic Affiliation3  |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

NOTE: To be determined by the programme

Traditional leaders for the child's community

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| Leader 1             | Leader 2             | Leader 3             |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

NOTE: To be determined by the programme

Languages spoken by the child

Language1

Language2

Other

NOTE: To be determined by the programme

Child's Religion

Religion 1

Religion 2

Other

NOTE: To be determined by the programme

Birth/ Home Address

|                      |                      |   |
|----------------------|----------------------|---|
| Country              | Admin Level 1        | Admin Level 2   |
| <input type="text"/> | <input type="text"/> | <input type="text"/>  |
| Admin Level 3        | Admin Level 4        | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |
| <input type="text"/> | <input type="text"/> | <input type="text"/>  |

NOTE: Each Admin level can be adapted to the specific address format of each country

Telephone number

Distinguishing physical characteristics

Does the child have basic numeracy/literacy skills? Yes  No

What type of education, training or working experience has the child experienced prior to separation? Early Childhood  Secondary  Non-Formal Education  Other   
 Primary  Vocational  Accelerated Learning

NOTE: To be determined by the programme

If relevant what level has the child achieved?

(P1, P2, P3, P4, P5, P6, GS1, GS2, GS3, SS1, SS2, SS3, Level 1, Level 2, Tailoring, Hairdressing, Carpentry, Woodwork, Other, etc)

NOTE: To be determined by the programme (as many levels can be added to the form and into the database)

**SECTION 2 - FAMILY DETAILS**

Child's Father 

|            |             |           |
|------------|-------------|-----------|
| First Name | Middle Name | Last Name |
|------------|-------------|-----------|

Is the father alive? Yes  No  Don't Know  Father's Profession/Occupation

Father's Home address (if different from child birth/home address) 

|               |               |   |
|---------------|---------------|---|
| Country       | Admin Level 1 | Admin Level 2   |
| Admin Level 3 | Admin Level 4 | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |

Child's Mother 

|            |             |           |
|------------|-------------|-----------|
| First Name | Middle Name | Last Name |
|------------|-------------|-----------|

Is the mother alive? Yes  No  Don't Know  Mother's Profession/Occupation

Mother's Home address (if different from child birth/home address) 

|               |               |   |
|---------------|---------------|---|
| Country       | Admin Level 1 | Admin Level 2   |
| Admin Level 3 | Admin Level 4 | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |

If father or mother believed dead, give details including whether information has been verified. 

|  |
|--|
|  |
|  |

Name of Caregiver before separation (if different from father/ mother) 

|            |             |           |
|------------|-------------|-----------|
| First Name | Middle Name | Last Name |
|------------|-------------|-----------|

Relationship (Father, Mother, Sister, Brother, Uncle, Aunt, Grandmother, Grandfather, other)

NOTE: To be determined by the programme

Permanent address of child & family prior to separation (if different from child birth/home address) 

|               |               |   |
|---------------|---------------|---|
| Country       | Admin Level 1 | Admin Level 2   |
| Admin Level 3 | Admin Level 4 | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |

Telephone number

**Family Members the Child is Separated from**

Please write down any names or nicknames of significant others mentioned by the child. For children under 5 or others who can provide little information, ask the child again from time to time the names of his/her mother, father, brothers and sisters.

| Relationship | Name (1st, last and nickname) | Sex | Age | Alive? | Occupation | Last known address | Separation Date | Comments |
|--------------|-------------------------------|-----|-----|--------|------------|--------------------|-----------------|----------|
|              |                               |     |     |        |            |                    |                 |          |
|              |                               |     |     |        |            |                    |                 |          |
|              |                               |     |     |        |            |                    |                 |          |

**SECTION 3 - HISTORY OF SEPARATION**

Date of Separation

What was the main cause of separation? Voluntary  Divorce/ Remarriage  War  Poverty   
 Abandoned  Natural Disaster  Death  Abducted   
 Family abuse/violence/exploitation  Sickness of family member  Repatriation  Population movement   
 Lack of access to services/support  Entrusted into the care of an individual/agency  Other   
 please specify

NOTE: To be determined by the programme (as many cause of separations can be added to the form and into the database)

|                     |               |               |   |
|---------------------|---------------|---------------|---|
| Place of Separation | Country       | Admin Level 1 | Admin Level 2   |
|                     | Admin Level 3 | Admin Level 4 | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |

Describe the circumstances of separation

Describe extra movements between place of separation and current location

Details of others who may be able to provide tracing information and how to contact them.

**SECTION 4 - SIBLINGS (Brothers & Sisters)/RELATIVES ACCOMPANYING THE CHILD**

Each child will require their own file and should be entered into the Database separately

1st

|            |             |           |
|------------|-------------|-----------|
| First Name | Middle Name | Last Name |
|------------|-------------|-----------|

|                     |                      |                      |                      |
|---------------------|----------------------|----------------------|----------------------|
| Database I/D Number | <input type="text"/> | Any other I/D Number | <input type="text"/> |
|---------------------|----------------------|----------------------|----------------------|

|  |                      |                   |                      |
|--|----------------------|-------------------|----------------------|
| Relationship (Sister, Brother, Uncle, Aunt, Grandmother, Grandfather, other) | <input type="text"/> | Age (approximate) | <input type="text"/> |
|--|----------------------|-------------------|----------------------|

NOTE: To be determined by the programme

2nd

|            |             |           |
|------------|-------------|-----------|
| First Name | Middle Name | Last Name |
|------------|-------------|-----------|

|                     |                      |                      |                      |
|---------------------|----------------------|----------------------|----------------------|
| Database I/D Number | <input type="text"/> | Any other I/D Number | <input type="text"/> |
|---------------------|----------------------|----------------------|----------------------|

|  |                      |                   |                      |
|--|----------------------|-------------------|----------------------|
| Relationship (Sister, Brother, Uncle, Aunt, Grandmother, Grandfather, other) | <input type="text"/> | Age (approximate) | <input type="text"/> |
|--|----------------------|-------------------|----------------------|

NOTE: To be determined by the programme

3rd

|            |             |           |
|------------|-------------|-----------|
| First Name | Middle Name | Last Name |
|------------|-------------|-----------|

|                     |                      |                      |                      |
|---------------------|----------------------|----------------------|----------------------|
| Database I/D Number | <input type="text"/> | Any other I/D Number | <input type="text"/> |
|---------------------|----------------------|----------------------|----------------------|

|  |                      |                   |                      |
|--|----------------------|-------------------|----------------------|
| Relationship (Sister, Brother, Uncle, Aunt, Grandmother, Grandfather, other) | <input type="text"/> | Age (approximate) | <input type="text"/> |
|--|----------------------|-------------------|----------------------|

**SECTION 5 - CURRENT CARE ARRANGEMENTS**

What are the child's current care arrangements?

|                        |                          |           |                          |                     |                          |
|------------------------|--------------------------|-----------|--------------------------|---------------------|--------------------------|
| Foster Family          | <input type="checkbox"/> | Street    | <input type="checkbox"/> | Interim Care Centre | <input type="checkbox"/> |
| Child Headed Household | <input type="checkbox"/> | Orphanage | <input type="checkbox"/> | Other               | <input type="checkbox"/> |

NOTE: To be determined by the programme

please specify

Name/address of agency providing or supporting care arrangement

|                                |                      |   |                      |
|--------------------------------|----------------------|---|----------------------|
| Name of the current caregiver? | <input type="text"/> | What is this person's relationship to the child?<br>(Sister, Brother, Uncle, Aunt, Grandmother, Grandfather, Other) | <input type="text"/> |
|--------------------------------|----------------------|---|----------------------|

Address where is the child currently living

|               |               |   |
|---------------|---------------|---|
| Country       | Admin Level 1 | Admin Level 2   |
| Admin Level 3 | Admin Level 4 | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |

When did this care arrangement start?

If the current address is temporary, where do the caretaker/s plan to live (repatriate, move, etc)?

|               |               |   |
|---------------|---------------|---|
| Country       | Admin Level 1 | Admin Level 2   |
| Admin Level 3 | Admin Level 4 | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |

Is alternative interim or longer term care required? Provide details.

**SECTION 6 - ADDITIONAL INFORMATION ON PROTECTION CONCERNS**

Provide as much information as possible on all of the protection concerns identified in section one above including details of the concern/s, action required, action taken and any necessary follow up. Please include dates of any actions taken and highlight the need for any urgent intervention.

|  |  |
|--|--|
|  |  |
|  |  |
|  |  |

Assessment:      Urgent Intervention       Ongoing Monitoring       No Further Action Needed

**SECTION 7 - WISHES OF THE CHILD (PREFERRED PARENT/S/CAREGIVER'S/FAMILY MEMBERS FOR TRACING)**

Type of care arrangement the child wishes to have      Interim Care       Family Reunification       Independent living arrangement

Type of immediate basic assistance needed

Does the child want family reunification?      Yes, as soon as possible       Yes, but later       No

If "No" or "yes, but later", please explain why:

**If the child does not want family reunification:**

|   |               |               |   |
|---|---------------|---------------|---|
| Where does the child wish / plan to live? | Country       | Admin Level 1 | Admin Level 2   |
|   | Admin Level 3 | Admin Level 4 | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |

Who does the child plan to live with?      Self       Husband/wife/partner       Other family members       Don't know

If there is no-one the child wishes to live with what longer term care arrangement would they prefer e.g. foster care, adoption, small group home, child headed household, independent living?

**If the child does want family reunification:**

**1st Preference**

Name      

|            |             |           |
|------------|-------------|-----------|
| First Name | Middle Name | Last Name |
|------------|-------------|-----------|

Relationship

(Father, Mother, Sister, Brother, Uncle, Aunt, Grandmother, Grandfather, other)

NOTE: To be determined by the programme

|                    |               |               |   |
|--------------------|---------------|---------------|---|
| Last known address | Country       | Admin Level 1 | Admin Level 2   |
|                    | Admin Level 3 | Admin Level 4 | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |

Telephone number

**2nd Preference**

Name      

|            |             |           |
|------------|-------------|-----------|
| First Name | Middle Name | Last Name |
|------------|-------------|-----------|

Relationship

(Father, Mother, Sister, Brother, Uncle, Aunt, Grandmother, Grandfather, other)

|                    |               |               |   |
|--------------------|---------------|---------------|---|
| Last known address | Country       | Admin Level 1 | Admin Level 2   |
|                    | Admin Level 3 | Admin Level 4 | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |

Telephone number

**3rd Preference**

Name      

|            |             |           |
|------------|-------------|-----------|
| First Name | Middle Name | Last Name |
|------------|-------------|-----------|

Relationship

|                    |               |               |   |
|--------------------|---------------|---------------|---|
| Last known address | Country       | Admin Level 1 | Admin Level 2   |
|                    | Admin Level 3 | Admin Level 4 | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |

Telephone number

Is the child in contact with, or have they heard from any relatives? Yes  No

If yes, give details.

Is the child willing for their personal details (name, photo, etc) to be made public in support of tracing? Yes  No

**SECTION 8 - OTHER INFORMATION**

Give the name of any other agency that has interviewed the child

Give any other information of relevance that may assist with tracing for the child

List details of any documents carried by the child

**SECTION 9 - DATA CONFIDENTIALITY**

Does the child want to withhold all or a part of the information they have given from certain individuals / agencies? Yes  No

Who do they want to withhold it from? Family  Government  Non-State Actors  Others

Specify what information should be withheld

Reasons for withholding information (can select multiple)

Fear of harm to themselves or others  Want to communicate information themselves

Other reason  Please specify

Additional information

**SECTION 10 - DETAILS OF INTERVIEWER**

Name/Sign.

Position

Agency  Date of interview

|                       |               |               |   |
|-----------------------|---------------|---------------|---|
| Location of Interview | Country       | Admin Level 1 | Admin Level 2   |
|                       | Admin Level 3 | Admin Level 4 | Village/Area/Physical Address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc. |

Data Entry Fields for the Database are shaded and enclosed within boxes with thicker borders