



# VERIFICATION FORM



EU-IOM  
KNOWLEDGE  
MANAGEMENT HUB

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Project implemented by IOM

## SECTION 1 - INFORMATION ABOUT INQUIRER

<p>First name</p> <p>Middle name</p> <p>Last name</p> <p><b>FULL NAME</b></p>		
<p>AGE</p> <p>GENDER</p> <p>RELATIONSHIP</p>	<p>(Father, Mother, Sister, Brother, Uncle, Aunt, Grandmother, Grandfather, other)</p>	
<p>CURRENT ADDRESS</p> <p>Country</p> <p>Admin Level 1</p> <p>Admin Level 2</p> <p>Admin Level 3</p> <p>Admin Level 4</p>	<p>Village/area/physical address - if not known enter landmarks e.g. hills, trees, names of schools or hospital etc.</p>	

## SECTION 2 - CHILD'S PERSONAL DETAILS: ask the adult the following questions and record the answers

	First name	Middle name	Last name
<b>CHILD'S NAME</b>			
<p>OTHER NAMES/SPELLINGS CHILD IS KNOWN BY</p>	<p>GENDER</p>	<p>AGE</p>	<p>years</p>
<p>DO YOU RECOGNISE THE CHILD FROM ANY OF THE PHOTOGRAPHS DISPLAYED (if available)</p>			<p>Yes      No</p>
<p>WHAT IS THE NAME OF THE CHILD'S FATHER?</p>			<p>Note: If the child is under 5, you may want to ask how would the child call the father.</p>
<p>IS HE ALIVE?</p>	<p>Yes</p>	<p>No</p>	<p>Don't Know</p>
<p>CURRENT ADDRESS OF FATHER</p>			

WHAT IS THE NAME OF THE CHILD'S MOTHER?

Note: If the child is under 5, you may want to ask how would the child call the mother.

IS SHE ALIVE?      Yes      No      Don't Know

CURRENT ADDRESS OF MOTHER

WHAT ARE THE NAMES OF OTHER FAMILY MEMBERS?

ARE ANY OTHER CHILDREN MISSING?      Yes      No

WHERE DID THE CHILD LIVE BEFORE 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.

WHAT INFORMATION DO YOU HAVE ABOUT THE CHILD'S LIFE THAT WOULD HELP TO IDENTIFY THE CHILD? (examples: favourite activities, friends, pets, special relationships, neighbours, name of last school attended)

WHAT IMPORTANT AND UNIQUE EVENTS DO YOU THINK THE CHILD MIGHT REMEMBER?

FOR CHILD UNDER 5, PLEASE DESCRIBE THE CLOTHES WORN BY THE CHILD OR OBJECTS WORN BY THE CHILD AT THE TIME OF THE SEPARATION (medal, bracelet, etc.)

### SECTION 3 - CIRCUMSTANCES OF SEPARATION

DATE OF SEPARATION

PLACE OF SEPARATION

CIRCUMSTANCES OF SEPARATION (e.g. how the child became separated, who the child was with at the time, etc)

### SECTION 4 - VERIFICATION

DOES THE INFORMATION PROVIDED MATCH WITH THE INFORMATION ON THE CHILD'S FILE?      Yes      No

### SECTION 5 - ACCEPTANCE TO TAKE CARE OF THE CHILD

DO YOU WANT THE CHILD TO COME AND LIVE WITH YOU?

Yes  
No

ARE YOU ABLE TO CARE FOR HIM/HER/THEM?

Yes  
No

**SECTION 6 - AGREEMENT TO TAKE THE CHILD**

**I agree to take this child into my home to live as part of my family**

It is important that the child is fully informed about the family and community he/she is returning to.

Please use the rest of the form to write information that will help the child make an informed decision about reunification and to be fully prepared. For example, any significant changes in the family or community since the child was separated: family members who have died or been born; the social and economic situation of the family; friends who the child will see and remember; what the educational opportunities are etc.

\_\_\_\_\_  
ADULT'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PLACE OF INTERVIEW

**SECTION 7 - FORM COMPLETED BY**

NAME

POSITION

AGENCY

PLACE

DATE



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