

# Center for Human Identification -Missing Persons

3400 Camp Bowie, Fort Worth, TX 76107  
1-800-763-3147, www.unthsc.edu/center-for-human-identification

## Unidentified Human Remains Submission Form

**Instruct ons:** Complete each section as applicable (shaded areas will be completed by CHI).  
**Note:** Sections 1, 2, 4, 5 and 6 are required for submission. Omission of required information will cause a delay in processing.

CHI Case No. \_\_\_\_\_

### 1. SERVICES REQUESTED

**Forensic Anthropological Analysis**

**Note:** If submitting remains for Forensic Anthropological analysis, please submit all of the skeletal elements that were recovered. Include with this submission form any investigative reports, scene descriptions, scene photographs, and maps. If you have questions regarding the submission of remains for anthropological analysis, call the Laboratory of Forensic Anthropology directly at (800) 279-1339.

**DNA Analysis (nuclear, mtDNA and/or Y-STRs) and CODIS entry (if applicable)**

**Note:** Type of DNA Analysis will be case dependent and determined by a qualified analyst

### 2. SUBMITTING AGENCY

Agency: \_\_\_\_\_ Agency Case No: \_\_\_\_\_

Address: \_\_\_\_\_ NCIC No: \_\_\_\_\_

\_\_\_\_\_ NamUs UP No: \_\_\_\_\_

\_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Fax No: \_\_\_\_\_

Agency's Shipping Company and Account No: \_\_\_\_\_

*Required for return shipment of remains*

### 3. INVESTIGATING AGENCY List medicolegal authority if a different agency from above

Agency: \_\_\_\_\_ Agency Case No: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Fax No: \_\_\_\_\_

### 4. EVIDENCE SUBMITTED Attach additional paperwork if needed

CHI SAMPLE NO.	ITEM NO.	QUANTITY	DESCRIPTION

Additional paperwork attached

### 5. CHAIN OF CUSTODY

Released by: \_\_\_\_\_  
Signature Printed Name Date & Time Released

Shipped by: \_\_\_\_\_  
Shipping Company Tracking Number

Received by: \_\_\_\_\_  
(For CHI Use Only) Signature Printed Name Date & Time Received

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### 6. UNIDENTIFIED HUMAN REMAINS RELATED INFORMATION

Date Remains Found: \_\_\_\_\_

Location Remains Found (include City/County and State): \_\_\_\_\_

Are dental records available for the remains?  Yes  No

Was the whole body or complete skeleton found?  Yes  No

If Known: Age: \_\_\_\_\_ Sex:  Female  Male Race: \_\_\_\_\_ Height: \_\_\_\_\_

Center for Human Identification REQUIRES that a descriptive forensic report(s) be included with the submission of remains (unless forensic anthropological analysis has been requested). Acceptable reports include: Medical Examiner, Coroner, Forensic Anthropologist, or Forensic Pathologist reports. The submission of investigative reports is encouraged. Please indicate the reports included with this submission:

- Medical Examiner or Forensic Pathologist       Investigator (Sheriff, Police Department, etc.)  
 Forensic Anthropologist       Forensic Odontologist

**Note:** The information contained in these reports is often critical in the CODIS identification process. These reports are treated as confidential documents related to the case.

### 7. ASSOCIATED CASE INFORMATION Complete this section if there is information regarding the potential identity of the unidentified remains

Name of Missing Person: \_\_\_\_\_  
Last First Middle

Investigating Agency: \_\_\_\_\_ Agency Case No: \_\_\_\_\_  
(for the missing person's case)

NamUs MP No: \_\_\_\_\_ NCIC No: \_\_\_\_\_

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

If yes, were reference samples submitted to CHI?  Yes, CHI Case No: \_\_\_\_\_  
 No

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

**NOTE:** Family reference samples should be packaged separately and submitted with the appropriate submission form.

### 8. ADDITIONAL INFORMATION Include any important details related to this case which may assist CHI

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### 9. SHIPPING AND CONTACT INFORMATION

Submit this form with the sample. Evidence items must be shipped using a carrier which can track the shipment (FedEx, UPS, DHL, etc). Overnight shipping is recommended and biodegradable samples must be packaged appropriately. **See shipping guides for instructions**, <https://www.unthsc.edu/center-for-human-identification/sample-submission/>. For questions or assistance with this form, contact the CHI Evidence Unit at 1-800-763-3147 or [missingpersons@unthsc.edu](mailto:missingpersons@unthsc.edu).

Shipping Address: Center for Human Identification  
Attn: Evidence, CBH 6th Floor  
3400 Camp Bowie Blvd.  
Fort Worth, TX 76107

CHI Case No.