

MINNESOTA MISSING PERSON'S DNA PROJECT

DNA Consent Form

Consent for Collection, Testing and CODIS Entry

Name of Missing Person: _____

Last

First

MI

Family Member Sample: _____

Last

First

MI

Relationship to Missing Person: _____ NCIC No.: _____

I understand that the answers provided on this form are correct to the best of my knowledge. I fully understand that my answers are critical to the process of identifying my missing family member.

I freely and voluntarily consent to provide oral swab samples for DNA analysis and entry into the Combined DNA Index System (CODIS) database, maintained by the FBI under authority of Title 42, United States Code, Section 14132. Law enforcement agencies having online access to the missing persons database may search against my DNA profile for potential matches. I understand that the information I have provided is protected by the Privacy Act notices for the National DNA Index System and the FBI's Central Records System as most recently published in the Federal Register. I also understand that my sample will be destroyed and my DNA profile will be removed from the CODIS database once my family member has been positively identified.

I authorize the appropriate law enforcement agent listed below to collect these samples for the sole purpose of identifying my missing family member. I have witnessed my swab samples being collected and placed in the envelope and sealed.

Signature of family member or legal guardian giving consent:

_____ Date: _____

I, on _____ at _____: _____ a.m / p.m have verified the identity of the individual who is providing the DNA sample. I then collected two swab samples from this individual and placed them in the envelope and then sealed the envelope.

Law Enforcement Agent collecting DNA swab samples:

Print Name: _____

Signature: _____

I understand that I am not required or obligated to provide a DNA sample, and that my consent to have a DNA sample taken is knowingly and voluntarily made. I further consent to the use of my DNA profile in the anonymous population database to aid in statistical inferences. The database will not contain any of my personal information, and the DNA profile cannot be associated with me as a donor.

Signature of family member or legal guardian giving consent:

_____ Date: _____

