

Use this outline to draw clothes, tattoos, rings, etc.



victim/witness memory enhancement FORM

Complete this form by yourself —
DO NOT discuss this with anyone else!

WITNESS NAME: _____

ADDRESS: _____

PHONE: _____ DATE: _____

FEMALE

AGE: _____

ETHNICITY: _____

HAIR COLOR: _____

HAIR TYPE: _____

FACE SHAPE: _____

MOUTH-LIP SHAPE: _____

EYE COLOR: _____

EYES: _____

EYEBROWS: _____

NOSE: _____

CHIN: _____

COMPLEXION: _____

TEETH: _____

SLAUGHTER: _____

FOOTWEAR: _____

ACCESSORIES: _____

REGULARITY: _____

TYPE OF INJURY: _____

ACTUAL WOUNDS/SCARS: _____

HEIGHT: _____

WEIGHT: _____

Large blank area for drawing and notes, with horizontal lines for writing.

