



On-Site Youth Firesetting Questionnaire

Child's Name: (First, Middle, Last)

Date of Birth: **Age:** Male Female

Address:

Phone #: **School:**

Child's Attitude: Polite Excited Remorseful Cooperative Combative Other: _____

Parent/Guardian Information: |

Child lives with: Mother Father Both Foster Parents Other: _____

Caregiver's Name : (First, Middle, Last)

Attitude: Cooperative Uncooperative Indifferent Concerned Other _____

Address: (If Different)

Home Phone #: **Work Phone #:**

Caregiver's Name: (First, Middle, Last)

Attitude: Cooperative Uncooperative Indifferent Concerned Other _____

Address: (If Different)

Home Phone #: **Work Phone #:**

Nature of Incident: |

Date: **Time:** **Run #:**

What Was Burned: Paper Grass Child's Own Property Gas Other: _____

Source of Ignition: Lighter Novelty Lighter Matches Other: _____ **Accessed From:** _____

Other Juveniles Involved: Yes No *(If yes, fill out a separate form for each juvenile)*

Location to Home: At Home Away from Home Occupied Structure Unoccupied Structure

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Recorded by: _____

1. If anyone is injured or if there is damage to property, contact an Investigator to request that they report to the scene for an on-site interview. If an Investigator is not needed please complete the Youth Firesetting On-site Questionnaire and bring it to _____ for the Chief Fire Investigator.
2. ALL Fires involving a juvenile must be reported to the Chief Fire Investigator for follow-up. Any information involving the juvenile and the fire should be relayed using the Youth Firesetting On-site Questionnaire and a copy of the incident report.
3. **ALL information relating to the juvenile is highly confidential material. Please handle all conversations and correspondence as such. The juvenile's name should not be mentioned in the incident report.**

Local FD Contact Information: