



FIRESENSE PROGRAM

YOUTH FIRESETTING PREVENTION AND INTERVENTION

APPLICATION FORM

Instructions for completing this form:

Save this PDF document to your computer under a different name. Open the PDF document from your computer with **Acrobat Reader**. Type the requested information in the fields provided, save the completed document and click the SUBMIT button at the bottom of this form. This will attach the completed PDF form to an e-mail addressed to: NorfolkDA.FireSense@mass.gov. The Parent/Guardian or Attorney representing the applicant will be contacted if additional information is required and to schedule an intake interview. The completion of an application does not guarantee admittance to the Norfolk FireSense Program.

Applicant Information					
Name:					
Street Address:					
City or Town:		State:		Zip:	
Age:		Date of Birth			
School Attending:				Grade:	

Name of Parentor Guardian (Primary Contact):			
Street Address:			
City or Town:		Phone # (home)	
Phone # (cell)		Phone # (work)	
E-Mail Address			

Name of Attorney Representing Applicant:			
Street Address:			
City or Town:			
Phone # (cell)		Phone # (work)	
E-Mail Address		Fax#	

Person Completing Application Form:					
Name:					
Title:					
Street Address:					
City or Town:		State:		Zip:	
Phone # (cell)		Phone # (work)			
E-Mail Address		Fax#			

The Norfolk FireSense Program is an educational program available to help prevent and address youth fire setting and fire play behavior. Qualifying program participants undergo an intake interview and screening process. To maximize the safety of children, families, communities and firefighters, most youth are referred through the juvenile court system. Referrals may also be made by school systems, police fire departments and family members. Measures are taken to maintain confidentiality. As appropriate, children and families may be referred to additional intervention services through service provider networks and /or the juvenile court system.

SUBMIT