



Juvenile Firesetting Reporting Form

Note: The information collected will be used for statistical purposes of Juvenile Firesetting in British Columbia

Type of incident	<input type="text"/>	Date of report	<input type="text"/>
Fire department	<input type="text"/>		
Referral source	<input type="text"/>	Name of Reporter	<input type="text"/>
Incident date	<input type="text"/>	Time of day	<input type="text"/>
Estimated dollar loss	<input type="text"/>	Injuries	<input type="text"/>
		Deaths	<input type="text"/>
Ignition source used	<input type="text"/>	Ignition source obtained from	<input type="text"/>
Other children involved	<input type="text"/>	If Yes, how many	<input type="text"/>
Object ignited	<input type="text"/>		
Child gender	<input type="text"/>	Age	<input type="text"/>
Marital status of biological parents	<input type="text"/>		
Custodial parent/caregiver	<input type="text"/>		
Marital status of custodial parent/caregiver	<input type="text"/>		
Smokers in home	<input type="text"/>		
Working smoke alarms in home	<input type="text"/>		
Child has history of fireplay/setting	<input type="text"/>		
Previous intervention by fire department	<input type="text"/>		
Previous counselling of child	<input type="text"/>		
Action taken	<input type="text"/>		
Status of child	<input type="text"/>		
Additional comments	<input type="text"/>		