
ARSON TRAINING PERMISSION FORM

Students name: _____ Date of Birth: _____

Specialized training in Arson Detection and Investigative Techniques can be of a sensitive nature to the security and well-being of local communities. It is necessary that a fire chief is aware that his/her personnel are seeking or actively involved in arson related training and we must be assured that such training is of benefit to and for the purpose of fire investigation activities of the local fire department.

As the fire chief, or an authorized senior official of the fire department, I hereby approve the enrollment of said firefighter _____ into the class **FIRE INVESTIGATION:FIRST RESPONDERS** at the annual NFA In-State Weekend in **MT STERLING** the weekend of **FEBRUARY 2-3, 2019**.

Chief or designee (print): _____ Signature: _____

Contact phone #: _____ Dept Representing: _____
