



Juvenile Fire Setter 1

- Name: _____
 - Certification issued date _____
 - Certification expiration date _____
 - Your Department: _____ Your Supervising Officer: _____
 - Complete a renewal bubble sheet. FDID affiliation # is 00001. Renewal for Juvenile Fire Setter I is 40. Use your home address. Don't forget to sign your name on the front page.
 - Include a letter from your department supervisor that you are currently and will continue to act in this role for your department.
 - Bring to HCTC this checklist, the letter and a completed bubble sheet.
- ! Renewals will not be processed until all these forms are complete and together. DO NOT HAND IN PARTIALLY COMPLETE RENEWALS. THEY WILL BE DISCARDED.