

# USPCA K-9 SURVEY VERIFICATION FORM

\*\*All teams claimed as having been trained by the applicant must complete this form. One form for each team. Copy as needed. Please note: all information on this form will be confirmed. False or misleading information will lead to removal from the USPCA.

Date \_\_\_\_\_

Handlers Name \_\_\_\_\_ K9's Name \_\_\_\_\_

Department \_\_\_\_\_ Cell \_\_\_\_\_

Home Phone \_\_\_\_\_ Email \_\_\_\_\_

SURVEY IS BEING COMPLETED FOR: \_\_\_\_\_

(Applicants name)

- When did you receive your "basic" PATROL DETECTOR dog training? \_\_\_\_\_
- Location of Basic Training: \_\_\_\_\_
- Head Trainer of Basic Training: \_\_\_\_\_
- Length of Basic Course(s) \_\_\_\_\_
- Date/location of PDI Certification: \_\_\_\_\_
- For Level II Trainer applicant only - Handlers please give the date and location you received your Tracking Certification and the date and location you received your detector dog Certification: Tracking: \_\_\_\_\_  
Detector: \_\_\_\_\_

\*\* Please note: The USPCA reserves the right to confirm with the Head Trainer or your supervisor that the applicant participated in the full length of the basic school. Head Trainers/Supervisors will be contacted and asked to confirm that the applicant fully participated in the complete training of any dogs that are claimed.

Your signature must be witnessed by the below Notary. All notaries should include their official stamp.

I certify that the above information is true and correct: APPLICANTS NAME \_\_\_\_\_  
(print legibly)

Applicants Signature: \_\_\_\_\_

## Notary of the Public:

State of \_\_\_\_\_ County of \_\_\_\_\_ Signed and sworn to before me this \_\_\_\_\_ day of 20\_\_\_\_

My commission expires \_\_\_\_\_ Notary Signature \_\_\_\_\_

**ONE SURVEY FORM FOR EACH TEAM CLAIMED MUST BE COMPLETED AND ACCOMPANY TRAINERS APPLICATION.**