

United States Police Canine Association, Inc

Explosive Odor Recognition Test

Date: _____

Team No. _____ Senior Judges Name: _____ # _____

Time Materials Placed: _____ Time Test Started: _____

Additional Judges - **ONLY ONE SCORING JUDGE**

Judges Name/#: _____ Judges Name/#: _____

Judges Name/#: _____ Judges Name/#: _____

Explosive weight must be approximately 3 oz.

MATERIALS	weight	1 st Pass	2 nd Pass	MATERIALS	weight	1 st Pass	2 nd Pass
1.				10.			
2.				11.			
3.				12.			
4.				13.			
5.				14.			
6.				15.			
7.				16.			
8.				17.			
9.				18.			

Team must find all explosive aids with no more than two passes.
Please list all blanks and distractors.

ORT Fail?

If yes, check this box.

= Find	= No Indication	= False Indication	= Handler Error
--------	-----------------	--------------------	-----------------

Please ensure that ONE copy of this form is mailed/emailed with the trial paperwork. Jan 2025 mjr