

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.**

Document must be notarized

I certify that the above information is true and correct: NAME _____
(print)

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.