

VIRGINIA POLICE CANINE ASSOCIATION

CERTIFICATION SCORE SHEET

BASIC CERTIFICATION

IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

EVENT	PASS	FAIL	DATE	EVALUATOR'S INITIAL
OBEDIENCE	<input type="checkbox"/>	<input type="checkbox"/>		
AGILITY	<input type="checkbox"/>	<input type="checkbox"/>		
ARTICLE SEARCH	<input type="checkbox"/>	<input type="checkbox"/>		
AREA SEARCH	<input type="checkbox"/>	<input type="checkbox"/>		
BOX SEARCH	<input type="checkbox"/>	<input type="checkbox"/>		
TRACKING	<input type="checkbox"/>	<input type="checkbox"/>		
CA - HANDSHAKE	<input type="checkbox"/>	<input type="checkbox"/>		
CA - FALSE RUN	<input type="checkbox"/>	<input type="checkbox"/>		
CA - RECALL	<input type="checkbox"/>	<input type="checkbox"/>		
CA - GUNFIRE	<input type="checkbox"/>	<input type="checkbox"/>		
CA - APPREHENSION	<input type="checkbox"/>	<input type="checkbox"/>		
CA - HANDLER PROTECTION	<input type="checkbox"/>	<input type="checkbox"/>		
NARCOTICS VEHICLE	<input type="checkbox"/>	<input type="checkbox"/>		
NARCOTICS ROOM	<input type="checkbox"/>	<input type="checkbox"/>		
NARCOTICS WALL	<input type="checkbox"/>	<input type="checkbox"/>		
EXPLOSIVES VEHICLE	<input type="checkbox"/>	<input type="checkbox"/>		
EXPLOSIVES ROOM	<input type="checkbox"/>	<input type="checkbox"/>		
EXPLOSIVES WALL	<input type="checkbox"/>	<input type="checkbox"/>		

EVALUATOR NOTES: _____

EVALUATOR'S
SIGNATURE: _____

DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION OBEDIENCE

BASIC CERTIFICATION

IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

HEELING PHASE

NORMAL PACE	<input type="checkbox"/>
SLOW PACE	<input type="checkbox"/>
FAST PACE	<input type="checkbox"/>
RIGHT TURN X 2	<input type="checkbox"/>
LEFT TURN X 2	<input type="checkbox"/>
ABOUT TURN X 2	<input type="checkbox"/>
FORGING	<input type="checkbox"/>
CROWDING	<input type="checkbox"/>
LAGGING	<input type="checkbox"/>
WIDE TURNS	<input type="checkbox"/>
EXTRA COMMANDS	<input type="checkbox"/>
CORRECT COMMANDS	<input type="checkbox"/>
UNMANAGEABLE	<input type="checkbox"/>
ADAPTING TO K-9	<input type="checkbox"/>
RELIEVING IN AREA	<input type="checkbox"/>

WALKING PHASE

START	<input type="checkbox"/>
DOWN-STAY	<input type="checkbox"/>
SIT-STAY	<input type="checkbox"/>
PICK-UPS	<input type="checkbox"/>
POOR SIT	<input type="checkbox"/>
POOR DOWN	<input type="checkbox"/>
EXTRA COMMANDS	<input type="checkbox"/>
CORRECT COMMANDS	<input type="checkbox"/>
UNMANAGEABLE	<input type="checkbox"/>
RELIEVING IN AREA	<input type="checkbox"/>

DISTANCE CONTROL

STAY	<input type="checkbox"/>
DOWN BY HAND	<input type="checkbox"/>
SIT BY HAND	<input type="checkbox"/>
DOWN BY VOICE	<input type="checkbox"/>
SIT BY VOICE	<input type="checkbox"/>
HALFWAY SIT	<input type="checkbox"/>
HALFWAY DOWN	<input type="checkbox"/>
RECALL	<input type="checkbox"/>
FINISH	<input type="checkbox"/>
EXTRA COMMANDS	<input type="checkbox"/>
CORRECT COMMANDS	<input type="checkbox"/>
UNMANAGEABLE	<input type="checkbox"/>
RELIEVING IN AREA	<input type="checkbox"/>
STAY	<input type="checkbox"/>

	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____

DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION AGILITY

BASIC CERTIFICATION

IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

HURDLES		CATWALK		A FRAME/BARRELS		TUNNEL	
HURDLE 1	<input type="checkbox"/>	LADDER CLIMB	<input type="checkbox"/>	A FRAME	<input type="checkbox"/>	DOWN	<input type="checkbox"/>
HURDLE 2	<input type="checkbox"/>	PLATFORM	<input type="checkbox"/>	BARREL	<input type="checkbox"/>	START	<input type="checkbox"/>
HURDLE 3	<input type="checkbox"/>	DISMOUNT	<input type="checkbox"/>	FINISH	<input type="checkbox"/>	WALK	<input type="checkbox"/>
HURDLE 4	<input type="checkbox"/>	FINISH	<input type="checkbox"/>	K-9 LAUNCHES-A FRAME	<input type="checkbox"/>	FINISH	<input type="checkbox"/>
BRICK HURDLE	<input type="checkbox"/>	K-9 LAUNCHES	<input type="checkbox"/>	K-9 LAUNCHES BARREL	<input type="checkbox"/>	UNDER CONTROL	<input type="checkbox"/>
PICKET FENCE	<input type="checkbox"/>	UNDER CONTROL	<input type="checkbox"/>	UNDER CONTROL	<input type="checkbox"/>	CORRECT COMMANDS	<input type="checkbox"/>
WINDOW HURDLE	<input type="checkbox"/>	CORRECT COMMANDS	<input type="checkbox"/>	CORRECT COMMANDS	<input type="checkbox"/>	EXTRA COMMANDS	<input type="checkbox"/>
CAR DOOR	<input type="checkbox"/>	EXTRA COMMANDS	<input type="checkbox"/>	EXTRA COMMANDS	<input type="checkbox"/>	RELIEVING IN AREA	<input type="checkbox"/>
FINISH	<input type="checkbox"/>	STRESS	<input type="checkbox"/>	STRESS	<input type="checkbox"/>		
CORRECT COMMANDS	<input type="checkbox"/>	RELIEVING IN AREA	<input type="checkbox"/>	RELIEVING IN AREA	<input type="checkbox"/>		
EXTRA COMMANDS	<input type="checkbox"/>						
RELIEVING IN AREA	<input type="checkbox"/>						

	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____ DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION

ARTICLE SEARCH

BASIC CERTIFICATION

IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

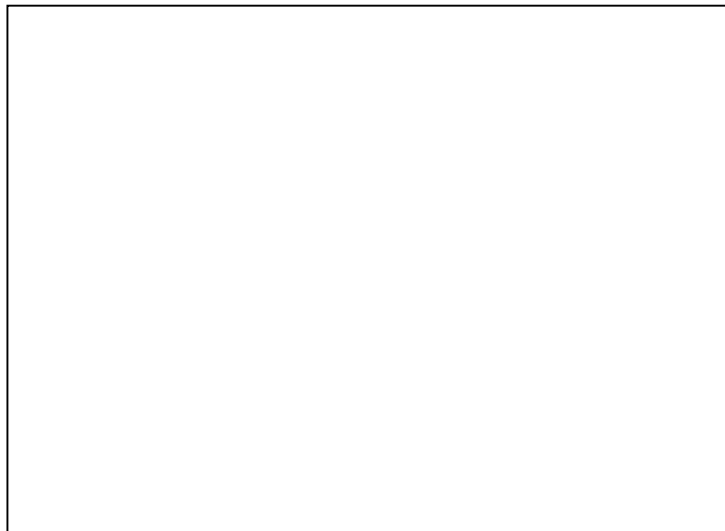
WEATHER CONDITIONS: _____
 (TEMPERATURE, WIND DIRECTION/SPEED, LIGHTING CONDITIONS, CLOUDY/CLEAR)

ARTICLES: 1) _____ 2) _____ 3) _____
 (ONE ARTICLE MUST BE METAL)

SET TIME: _____ START TIME: _____ FINISH TIME: _____
 (4 MINUTE TIME LIMIT, 30 SECOND WARNING GIVEN BY EVALUATOR)

DIAGRAM OF SEARCH AREA

CHECKS WIND	<input type="checkbox"/>
ENTERS AREA BEFORE K-9 INDICATES	<input type="checkbox"/>
RELIEVING IN AREA	<input type="checkbox"/>
ARTICLE 1	<input type="checkbox"/>
ARTICLE 2	<input type="checkbox"/>
ARTICLE 3	<input type="checkbox"/>
REWARD	<input type="checkbox"/>



	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

TEAM MUST RECOVER ALL ARTICLES TO PASS

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____ DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION AREA SEARCH

BASIC CERTIFICATION

IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

WEATHER CONDITIONS: _____

(TEMPERATURE, WIND DIRECTION/SPEED, LIGHTING CONDITIONS, CLOUDY/CLEAR)

SET TIME: _____ START TIME: _____ FINISH TIME: _____

DIAGRAM OF SEARCH AREA

CHECKS WIND	<input type="checkbox"/>	
ANNOUNCEMENTS	<input type="checkbox"/>	
ALERT	<input type="checkbox"/>	
CORRECT COMMANDS	<input type="checkbox"/>	
RELIEVING IN AREA	<input type="checkbox"/>	
OFFICER SAFETY	<input type="checkbox"/>	
	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>



X = SUSPECT

EVALUATOR NOTES: _____

EVALUATOR'S
SIGNATURE: _____

DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION BOX SEARCH

BASIC CERTIFICATION

IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

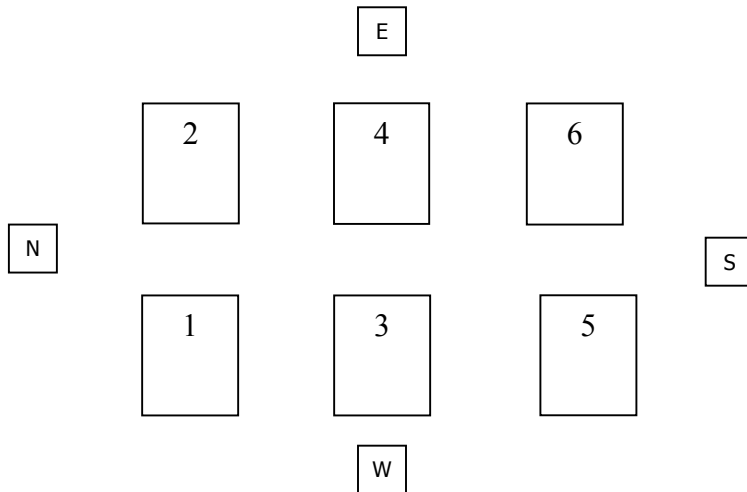
LOCATION: _____

WEATHER CONDITIONS: _____
(TEMPERATURE, WIND DIRECTION/SPEED, LIGHTING CONDITIONS, CLOUDY/CLEAR)

SET TIME: _____ START TIME: _____ FINISH TIME: _____

CHECKS WIND	<input type="checkbox"/>
ANNOUNCEMENTS	<input type="checkbox"/>
ALERT	<input type="checkbox"/>
CORRECT COMMANDS	<input type="checkbox"/>
RELIEVING IN AREA	<input type="checkbox"/>

DIAGRAM OF SEARCH AREA



	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

X = SUSPECT BOX

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____ DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION TRACKING

BASIC CERTIFICATION

IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

WEATHER CONDITIONS: _____
(TEMPERATURE, WIND DIRECTION/SPEED, LIGHTING CONDITIONS, CLOUDY/CLEAR)

SET TIME: _____ START TIME: _____ FINISH TIME: _____

CHECKS WIND	<input type="checkbox"/>	
START OF TRACK	<input type="checkbox"/>	
CROSS TRACK	<input type="checkbox"/>	
FIRST LEG	<input type="checkbox"/>	
SECOND LEG	<input type="checkbox"/>	
THIRD LEG	<input type="checkbox"/>	
MULTIPLE SURFACES	<input type="checkbox"/>	
RELIEVING ON TRACK	<input type="checkbox"/>	
LEAD CONTROL	<input type="checkbox"/>	
DISTRACTIONS	<input type="checkbox"/>	
EXTRA COMMANDS	<input type="checkbox"/>	
ARTICLE	<input type="checkbox"/>	
	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

DIAGRAM OF TRACK
ATTACHED

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____ DATE: _____

DIAGRAM OF TRACK

N

WIND

VIRGINIA POLICE CANINE ASSOCIATION

CRIMINAL APPREHENSION

BASIC CERTIFICATION

IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

HANDSHAKE

CANINE BREAKS	<input type="checkbox"/>	
EXTRA COMMANDS	<input type="checkbox"/>	
APPREHENSION	<input type="checkbox"/>	
	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

FALSE RUN

CANINE BREAKS	<input type="checkbox"/>	
EXTRA COMMANDS	<input type="checkbox"/>	
CANINE MOVES	<input type="checkbox"/>	
	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

RECALL

CANINE BREAKS	<input type="checkbox"/>
EXTRA COMMANDS	<input type="checkbox"/>
APPREHENSION	<input type="checkbox"/>
CORRECT COMMANDS	<input type="checkbox"/>
K-9 FAIL TO RETURN	<input type="checkbox"/>

	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

GUN FIRE

MOVES ON GUN FIRE	<input type="checkbox"/>
APPREHENSION ON GUN FIRE	<input type="checkbox"/>
APPREHENSION	<input type="checkbox"/>
ORDER DECOY TO DROP GUN	<input type="checkbox"/>
CORRECT COMMANDS	<input type="checkbox"/>
EXTRA COMMANDS	<input type="checkbox"/>
END CONTROL	<input type="checkbox"/>

	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

APPREHENSION

FAIL TO APPREHEND	<input type="checkbox"/>	
BITE AND HOLD	<input type="checkbox"/>	
BITE	<input type="checkbox"/>	
END CONTROL	<input type="checkbox"/>	
RE-ENGAGES DECOY	<input type="checkbox"/>	
MOVES ON STAY	<input type="checkbox"/>	
CLEAN SEARCH	<input type="checkbox"/>	
EXTRA COMMANDS	<input type="checkbox"/>	
	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

HANDLER PROTECTION

ASSIST W/OUT COMMAND	<input type="checkbox"/>
BITE	<input type="checkbox"/>
END CONTROL	<input type="checkbox"/>
MOVES ON STAY	<input type="checkbox"/>
EXTRA COMMANDS	<input type="checkbox"/>

	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____ DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION

NARCOTICS VEHICLE

BASIC CERTIFICATION IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

WEATHER CONDITIONS: _____

(TEMPERATURE, WIND DIRECTION/SPEED, LIGHTING CONDITIONS, CLOUDY/CLEAR)

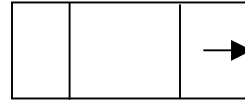
SET TIME: _____ START TIME: _____ FINISH TIME: _____

EXTERIOR HIDE #1

NARCOTIC TYPE: _____

WEIGHT: _____

HIDE LOCATION: _____

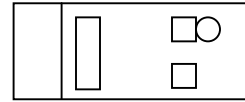


INTERIOR HIDE #1

NARCOTIC TYPE: _____

WEIGHT: _____

HIDE LOCATION: _____



EXTERIOR HIDE #2

NARCOTIC TYPE: _____

WEIGHT: _____

HIDE LOCATION: _____

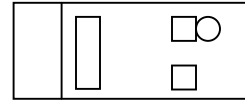


INTERIOR HIDE #2

NARCOTIC TYPE: _____

WEIGHT: _____

HIDE LOCATION: _____



BLANK: NO INDICATION OR ALERT

	EXTERIOR HIDE #1	INTINTERIOR HIDE #1	EXTERIOR HIDE #2	INTERIOR HIDE #2	BLANK
SAFETY CHECK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHECK WIND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FALSE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANLDER DID NOT INTERPRET ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCONSISTENT SEARCH SEQUENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANDLER KEYED CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
POOR LEAD CONTROL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CANINE LACK OF FOCUS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PROPER CONTROL OF CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD BEFORE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD AFTER ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____ DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION

NARCOTICS ROOM

BASIC CERTIFICATION IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

WEATHER CONDITIONS: _____

(TEMPERATURE, WIND DIRECTION/SPEED, LIGHTING CONDITIONS, CLOUDY/CLEAR)

SET TIME: _____ START TIME: _____ FINISH TIME: _____

HIDE #1

NARCOTIC TYPE: _____ WEIGHT: _____

HIDE LOCATION: _____

HIDE #2

NARCOTIC TYPE: _____ WEIGHT: _____

HIDE LOCATION: _____

HIDE #3

NARCOTIC TYPE: _____ WEIGHT: _____

HIDE LOCATION: _____

HIDE #4

NARCOTIC TYPE: _____ WEIGHT: _____

HIDE LOCATION: _____

BLANK: NO INDICATION OR ALERT

	HIDE #1	HIDE #2	HIDE #3
SAFETY CHECK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHECK WIND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FALSE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANLDER DID NOT INTERPRET ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCONSISTENT SEARCH SEQUENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANDLER KEYED CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
POOR LEAD CONTROL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CANINE LACK OF FOCUS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PROPER CONTROL OF CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD BEFORE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD AFTER ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____ DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION

NARCOTICS WALL

BASIC CERTIFICATION IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

WEATHER CONDITIONS: _____
 (TEMPERATURE, WIND DIRECTION/SPEED, LIGHTING CONDITIONS, CLOUDY/CLEAR)

SET TIME: _____ START TIME: _____ FINISH TIME: _____

HIDE #1

NARCOTIC TYPE: _____ WEIGHT: _____
 HIDE LOCATION: _____

HIDE #2

NARCOTIC TYPE: _____ WEIGHT: _____
 HIDE LOCATION: _____

HIDE #3

NARCOTIC TYPE: _____ WEIGHT: _____
 HIDE LOCATION: _____

BLANKS: _____

	HIDE #1	HIDE #2	HIDE #3
SAFETY CHECK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHECK WIND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FALSE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANLDER DID NOT INTERPRET ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCONSISTENT SEARCH SEQUENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANDLER KEYED CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
POOR LEAD CONTROL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CANINE LACK OF FOCUS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PROPER CONTROL OF CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD BEFORE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD AFTER ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____ DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION

EXPLOSIVES VEHICLE

BASIC CERTIFICATION IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

WEATHER CONDITIONS: _____

(TEMPERATURE, WIND DIRECTION/SPEED, LIGHTING CONDITIONS, CLOUDY/CLEAR)

SET TIME: _____ START TIME: _____ FINISH TIME: _____

HIDE #1

EXPLOSIVE TYPE: _____

HIDE LOCATION: _____

WEIGHT: _____

		→
--	--	---

HIDE #2

EXPLOSIVE TYPE: _____

HIDE LOCATION: _____

WEIGHT: _____

		→
--	--	---

HIDE #3

EXPLOSIVE TYPE: _____

HIDE LOCATION: _____

WEIGHT: _____

		→
--	--	---

HIDE #4

EXPLOSIVE TYPE: _____

HIDE LOCATION: _____

WEIGHT: _____

		→
--	--	---

BLANK: NO INDICATION OR ALERT

	HIDE #1	HIDE #2	HIDE #3	HIDE #4	BLANK
SAFETY CHECK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHECK WIND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FALSE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANLDER DID NOT INTERPRET ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCONSISTENT SEARCH SEQUENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANDLER KEYED CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
POOR LEAD CONTROL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CANINE LACK OF FOCUS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PROPER CONTROL OF CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD BEFORE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD AFTER ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____ DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION EXPLOSIVES ROOM

BASIC CERTIFICATION IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

WEATHER CONDITIONS: _____

(TEMPERATURE, WIND DIRECTION/SPEED, LIGHTING CONDITIONS, CLOUDY/CLEAR)

SET TIME: _____ START TIME: _____ FINISH TIME: _____

HIDE #1

EXPLOSIVE TYPE: _____ WEIGHT: _____

HIDE LOCATION: _____

HIDE #2

EXPLOSIVE TYPE: _____ WEIGHT: _____

HIDE LOCATION: _____

HIDE #3

EXPLOSIVE TYPE: _____ WEIGHT: _____

HIDE LOCATION: _____

HIDE #4

EXPLOSIVE TYPE: _____ WEIGHT: _____

HIDE LOCATION: _____

BLANK: NO INDICATION OR ALERT

	HIDE #1	HIDE #2	HIDE #3
SAFETY CHECK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHECK WIND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FALSE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANLDER DID NOT INTERPRET ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCONSISTENT SEARCH SEQUENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANDLER KEYED CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
POOR LEAD CONTROL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CANINE LACK OF FOCUS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PROPER CONTROL OF CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD BEFORE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD AFTER ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____ DATE: _____

VIRGINIA POLICE CANINE ASSOCIATION

EXPLOSIVES WALL

BASIC CERTIFICATION IN-SERVICE RE-CERTIFICATION

HANDLER: _____ CANINE: _____

DATE: _____ EVALUATOR: _____

LOCATION: _____

WEATHER CONDITIONS: _____
 (TEMPERATURE, WIND DIRECTION/SPEED, LIGHTING CONDITIONS, CLOUDY/CLEAR)

SET TIME: _____ START TIME: _____ FINISH TIME: _____

HIDE #1

EXPLOSIVE TYPE: _____ WEIGHT: _____

HIDE LOCATION: _____

HIDE #2

EXPLOSIVE TYPE: _____ WEIGHT: _____

HIDE LOCATION: _____

HIDE #3

EXPLOSIVE TYPE: _____ WEIGHT: _____

HIDE LOCATION: _____

BLANKS: _____

	HIDE #1	HIDE #2	HIDE #3
SAFETY CHECK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHECK WIND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FALSE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANLDER DID NOT INTERPRET ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INCONSISTENT SEARCH SEQUENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANDLER KEYED CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
POOR LEAD CONTROL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CANINE LACK OF FOCUS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PROPER CONTROL OF CANINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD BEFORE ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REWARD AFTER ALERT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	PASS	FAIL
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>

EVALUATOR NOTES: _____

EVALUATOR'S SIGNATURE: _____ DATE: _____