



Master Score Sheet

Patrol Tracking

Date: _____ Location: _____

	Handlers Name	Agency	Signature	Canine		
1.	_____	_____	_____	_____	PASS	FAIL
2.	_____	_____	_____	_____	PASS	FAIL
3.	_____	_____	_____	_____	PASS	FAIL
4.	_____	_____	_____	_____	PASS	FAIL
5.	_____	_____	_____	_____	PASS	FAIL
6.	_____	_____	_____	_____	PASS	FAIL
7.	_____	_____	_____	_____	PASS	FAIL
8.	_____	_____	_____	_____	PASS	FAIL

	Certifying Official	Signature	Number	Phase Tested
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____