



Master Score Sheet

Patrol Tracking

Date: _____ Location: _____

Handlers Name	Agency	Signature	Canine	PASS	FAIL
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. _____	_____	_____	_____