

FEMA National US&R Response System
Appendix I: FEMA US&R Certification Evaluation Cover Sheet
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 (This form must be typed)



Date: _____	Name of Canine: _____
Name of Handler: _____	Type of Canine: (Circle one) LF HRD
Task Force: _____	Location: _____
Chief Evaluator (print): _____	Chief Evaluator (signature): _____

# of Victims Required to Pass:		
# of Victims Found:		
# of False Alerts:		

Site ID:	Full Access		Limited Access	
Site Order:	1	2	1	2
Lead Evaluator:				
# of Victims or HR Placed:				
# of Victims or HR Found (according to parameters):				
# of Victims or HR Not Found:				
# of False Alerts:				
No Abuse of Canine:	Pass	Fail	Pass	Fail
No Aggressive Behavior to Humans or Other Canines by Canine:	Pass	Fail	Pass	Fail
Maintained Control of Canine:	Pass	Fail	Pass	Fail
Certification:	<input type="checkbox"/> Yes <input type="checkbox"/> No			