

NATIONAL POLICE CANINE ASSOCIATION
Human Concealment Certification Score Sheet

DATE: _____ LOCATION: _____

HANDLER'S NAME: _____ K9'S NAME: _____

AGENCY NAME AND STATE: _____

(DO NOT WRITE BELOW THIS LINE)

VEHICLE SEARCH

ORDER OF EXERCISE: **1 / 2 / 3**

NUMBER OF FINDS PLACED: **1 / 2** (Circle One)

NUMBER OF ALERTS CALLED: **1 / 2**

NUMBER OF FINDS LOCATED: **1 / 2**

CERTIFYING OFFICIAL NAME AND NUMBER: _____

AREA SEARCH

ORDER OF EXERCISE: **1 / 2 / 3**

NUMBER OF FINDS PLACED: **1 / 2** (Circle One)

NUMBER OF ALERTS CALLED: **1 / 2**

NUMBER OF FINDS LOCATED: **1 / 2**

CERTIFYING OFFICIAL NAME AND NUMBER: _____

INTERIOR SEARCH

ORDER OF EXERCISE: **1 / 2 / 3**

NUMBER OF FINDS PLACED: **1 / 2** (Circle One)

NUMBER OF ALERTS CALLED: **1 / 2**

NUMBER OF FINDS LOCATED: **1 / 2**

CERTIFYING OFFICIAL NAME AND NUMBER: _____

CERTIFICATION

NO LESS THAN 3 OF 4 FINDS LOCATED: **Y / N**

NO MORE THAN 4 ALERTS CALLED: **Y / N**

PASS **FAIL** (Circle One)

CERTIFYING OFFICIAL NAME AND NUMBER: _____