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**DHS/FEMA National US&R Response System  
Certification Preparation Cover Sheet**

(Please Type)

**Date:** \_\_\_\_\_

**Name of Handler:** \_\_\_\_\_ **Name of Canine:** \_\_\_\_\_

**Task Force:** \_\_\_\_\_ **Location:** \_\_\_\_\_

**Chief Evaluator (signature):** \_\_\_\_\_

<b># of Victims Required to Pass:</b>		
<b># of Victims Found:</b>		
<b># of False Alerts:</b>		

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



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**Strengths:**

**Weaknesses:**

**Recommendations:**



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