

SERVICE AND LEADER DOG PUPPY SCORESHEET



Show _____

Armband # _____

Date _____

Breed _____

Judge _____

Puppy age _____

Service Puppy OR Leader Dog Puppy (circle one)

Puppy number _____

EXERCISE	MAXIMUM POINTS	COMMENTS	SCORE
HEELING	30	<input type="checkbox"/> Lethargic.....Spiritless <input type="checkbox"/> <input type="checkbox"/> Lunging..... <input type="checkbox"/> <input type="checkbox"/> Lagging..... <input type="checkbox"/> <input type="checkbox"/> Sniffing..... <input type="checkbox"/> <input type="checkbox"/> Unmanageable..... <input type="checkbox"/>	
SLIPPERY FLOORS	15	<input type="checkbox"/> Shy..... <input type="checkbox"/> <input type="checkbox"/> Frightened..... <input type="checkbox"/> <input type="checkbox"/> Hesitant..... <input type="checkbox"/> <input type="checkbox"/> Unmanageable..... <input type="checkbox"/>	
STAIRS	15	<input type="checkbox"/> Lunging..... <input type="checkbox"/> <input type="checkbox"/> Lagging..... <input type="checkbox"/> <input type="checkbox"/> Hesitant..... <input type="checkbox"/> <input type="checkbox"/> Unmanageable..... <input type="checkbox"/>	
SUDDEN, LOUD NOISES	15	<input type="checkbox"/> Shy..... <input type="checkbox"/> <input type="checkbox"/> Frightened..... <input type="checkbox"/> <input type="checkbox"/> Hesitant..... <input type="checkbox"/> <input type="checkbox"/> Unmanageable..... <input type="checkbox"/>	
DOORS	15	<input type="checkbox"/> Shy..... <input type="checkbox"/> <input type="checkbox"/> Frightened..... <input type="checkbox"/> <input type="checkbox"/> Hesitant..... <input type="checkbox"/> <input type="checkbox"/> Unmanageable..... <input type="checkbox"/>	
OBEDIENCE	25	<input type="checkbox"/> Sit..... <input type="checkbox"/> <input type="checkbox"/> Down..... <input type="checkbox"/> <p style="text-align: center;">Advanced puppies only</p> <input type="checkbox"/> Sit Stay – 1 minute..... <input type="checkbox"/> <input type="checkbox"/> Down Stay – 3 minutes..... <input type="checkbox"/> <input type="checkbox"/> Come..... <input type="checkbox"/>	
GROOMING	45	<input type="checkbox"/> Ears – 5 points..... <input type="checkbox"/> <input type="checkbox"/> Eyes – 5 points..... <input type="checkbox"/> <input type="checkbox"/> Toenails – 5 points..... <input type="checkbox"/> <input type="checkbox"/> Coat (clean) – 15 points..... <input type="checkbox"/> <input type="checkbox"/> Free of parasites – 15 points..... <input type="checkbox"/>	
TEMPERAMENT	40	<input type="checkbox"/> Aggressive..... <input type="checkbox"/> <input type="checkbox"/> Shy..... <input type="checkbox"/> <input type="checkbox"/> Hesitant..... <input type="checkbox"/> <input type="checkbox"/> Nervous..... <input type="checkbox"/> <input type="checkbox"/> Suspicious..... <input type="checkbox"/>	
TOTAL SCORE	200		