

Monthly SDiT Progress Evaluation

Today's Date: _____

Dog Name: _____ Handler's Name: _____

Dog's DOB: _____ Dog's Age: _____

Obedience

(SDiT knows the following commands)

Command	Always	Sometimes	Periodically	Never
Responds to Name				
Sit				
Down				
Stand				
Come				
Heel				
Leave It				
Kennel				
Under				
Stay				
Wait				
Off Leash Recall (If appropriate)				
Relieves on Command				
(Mark all that are appropriate)	Concrete	Grass	Blacktop	Gravel

Puppy Handling

(SDiT willingly allows you to do each item)

	Always	Sometimes	Periodically	Never
Dog sits in front of you facing away				
Allows petting from head to tail				
Allows handling of tail				
Allows you to look in ears				
Allows you to look in eyes				
Allows you to look in mouth				
Allows you to restrain (hug)				
Allows you to handle feet				
Allows you to clip toe nails				

Public Interaction/Access

How many outings this month? _____

(Willingly does or performs the following without hesitation or fear reaction)

	Always	Sometimes	Periodically	Never
Enter/exit a store through automatic door				
Enter/exit a store through manual door				
Walk next to shopping cart				
Walk through food aisle without sniffing				
Ignores food on the floor				
Enter/exits/rides elevator				
Walks quietly up/down stairs				
Enter/exits/rides public transportation				

Public Transportation - Yes No If Yes, explain: _____

Any Veterinary Visits - Yes No If yes, Explain: _____

Any aggressive behavior? - Yes No If Yes explain: _____

Any accidents/Incidents - Yes No If Yes, explain: _____

Any fear Incidents - Yes No If Yes, explain: _____

My dog accomplished the following this month: _____

Goals for Coming Month

My SDiT will learn _____
