

Q & A		Students full name		DOB .../.../.....
Date : ... / ... /		Postcode:		2 day ? Y/N 4 day ? Y/N
	V3	Score	POSITIVE Please tick what student covers	AREAS TO CONSIDER Please note clearly
Correct use & conditioning of equipment	/4		
Dog Law	/2		
Body Language		.../4		
General Training Knowledge		.../8		
Operant Conditioning Knowledge		.../16		
Classical Conditioning Knowledge		.../16		
Total Pt's & % (Total x 2= %)/50%	Signed by Assessor..... Cross-reference Assessor	