

Pawsitive Action Foundation, Inc. **Basic Access Evaluation**

Date	 	
Evaluator		

Qualification for a Basic Access Certificate; the owner/handler and dog must attend 6 classes. The owner/handler will schedule an appointment for the evaluation. An approved PAF evaluator will conduct the evaluation at a public in-door location. The teams must pass ALL sections of the test to receive a BASIC ACCESS CERTIFICATE. Basic Access certifications permits you and a dog to go into public places representing Pawsitive Action. You may wear a purple PAF shirt and the dog may wear a purple "In Training" PAF vest. The purpose of the Basic Access Certification is so a handler/dog can enter public places and PRACTICE training curriculum, preparing for future certifications.

Owner Behavior and Responsibility			NEEDS MORE WORK
1.	Maintains dogs health: a) shows proof of current vaccinations, heartworm testing, heartworm and flea preventative medication; B) Dog appears healthy and appropriately active for breed.		
2.	Owner/handler has attended 6 PAF classes (proof of attendance from PAF office)		
3.	Owner/handler shows proof of dogs microchip number		
4.	Owner/handler shows proof of ID tag located on a buckle collar. Dog wears 24/7. Evaluator explains proper collar adjustment for dogs safety. (2 fingers between collar and dog's skin)		
5.	Owner/handler has an adequate play and exercise plan for the dog. (verbal or written)		
6.	Owner/handler understands Service Dog In –Training laws for public access. (Evaluator quizzes)		
7.	Owner/handler receives a copy of the Canine Good Citizen evaluation form		
D	og/Puppy Behaviors		
1.	Loads and unloads easily from a vehicle		
2.	Owner/handler understands how to manage hot pavement (5 second hand on pavement)		
3.	Dog/Puppy is free of aggression towards people		
4.	Free of aggression towards other dogs. Does not bark at approaching dog. Allows a non-reactive dog to sniff his/her body for less than 3 seconds.		
5.	Puppy/Dog walks away from non-reactive dog when called by his/her owner/handler. Both owner/handler and dog walk way from the non-reactive dog.		
6.	Owner/handler can hug the Dog/Puppy while it remains calm.		
7.	Owner/handler can handle all four paws. Dog/puppy remains calm and accepting		
8.	Dog/puppy allows the Owner/handler to take away a treat or toy.		
9.	Dog/Puppy allows owner/handler to brush/comb his/her body without protest		
10.	Allows (in any position) petting by the evaluator. Feet MUST remain on the floor.		

Puppy/Dog Behaviors			PASS	NEEDS MORE WORK
11.	Stays on leash with another person. Owner/handler walks away 10 steps and returns. The Dog/puppy remains calm and does not whine/bark			
12.	. Dog/puppy has a good attitude toward training and handler/owner. Does not appear to be afraid or intimidated by the owner/handler			
13.	Owner correctly uses treats, praise and behavior market	, praise and behavior marker (Clicker, verbal "Good")		
14.	Dog did not urinate or defecate near entrance/exit doo	efecate near entrance/exit doors or indoors		
15.	6. Walks on a leash—Dog follows the owner/handler through a public place. Dog does not disturb area or seek excessive attention from other people.			
16.	The dog/puppy can walk nicely next to a shopping cart.			
17.	7. The owner/handler demonstrates how to properly correct the dog/puppy for pulling on the leash.			
18.	3. Owner/handler demonstrates how to correctly prevent the dog/puppy to not touch something off-limits to the dog/puppy. "Leave It"			
19.	19. Sits on command—owner may use a food lure			
20.	Downs on command—owner/handler may use a food I			
21.	Comes to owner/handler from 6 feet way and sits near food lure.			
22.	Owner/handler demonstrates how the dog/puppy can handler sits on a chair for 60 seconds.	"Lie Down" on the floor while the owner/		
23.	 Reaction to distractions—Dog/puppy does not appear afraid of unexpected noises. Dog may star- tle but MUST recover within 5 seconds of the noise/distraction (example: book dropped on floor, opening umbrella) 			
Own	ner/Handler Name	Dog Name		
Micr	o Chip Number	Breed		
Dogs	s Age Date o	of Test		
Loca	tion Evalua	ator		
Evalı	uator Signature			
PASS	S or FAIL Cer	tificate Issued		

Received PAF Basic Access Vest ______ Received ID Card _____