



**AKC COMMUNITY CANINE<sup>SM</sup>**  
**Advanced Canine Good Citizen<sup>SM</sup> (CGCA)**

Sponsored by

**Ameriprise**  
Auto & Home Insurance



**TEST SUMMARY FORM**

Directions: The original of this form should be completed and mailed to AKC® for each CGCA event.

KEEP YELLOW COPIES FOR AT LEAST ONE YEAR. In place of this form, Evaluators may submit the Test Summary online at: [http://www.akc.org/events/cgc/evaluator\\_test\\_summary\\_form.cfm](http://www.akc.org/events/cgc/evaluator_test_summary_form.cfm).

Date of CGCA Test \_\_\_\_\_ Organization (club name, etc) \_\_\_\_\_

Please mark the ONE category that best describes this test.

- |  |   |
|--|---|
| <input type="radio"/> Private trainer (non AKC club test)              | <input type="radio"/> Therapy/service dog organizations |
| <input type="radio"/> AKC all breed club (all breeds)                  | <input type="radio"/> Shelter/rescue/humane societies   |
| <input type="radio"/> AKC obedience club                               | <input type="radio"/> Veterinary Clinic                 |
| <input type="radio"/> AKC specialty club (for one specific breed)      | <input type="radio"/> Boarding Kennel                   |
| <input type="radio"/> AKC Club – other (agility, field, tracking, etc) | <input type="radio"/> 4-H clubs                         |
| <input type="radio"/> Pet super store: Store name _____                | <input type="radio"/> Other _____                       |

City/State/ZIP of CGCA Test \_\_\_\_\_

Main Evaluator \_\_\_\_\_ Approved Evaluator Number (Required) \_\_\_\_\_  
(Evaluator must have passed online test.)

☐ Check here if this is a new address.

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

How many dogs entered?	_____	_____ Purebred	_____ Mixed breed
	Total		
How many dogs passed the test?	_____	_____ Purebred	_____ Mixed breed
	Total		

*I have the required experience for conducting CGC and CGCA evaluations. I have worked with other owners and their dogs and a variety of breeds. I am at least 18 years old. I have read and understand the CGCA Evaluator Guide. I have not been suspended from AKC. I am an AKC Approved CGC Evaluator.*

\_\_\_\_\_  
Evaluator Signature

Thank you very much. Please return to:  
AKC • Canine Good Citizen® Department • P.O. Box 900064 • Raleigh, NC 27675-9064



CG1S01



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Address \_\_\_\_\_

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Phone \_\_\_\_\_ Email \_\_\_\_\_

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