AKC S.T.A.R. Puppy® Program
TEST SUMMARY FORM

Directions: The original of this form should be completed and mailed to AKC® for each event, even if only one puppy was tested. MAIL THIS TEST SUMMARY FORM ONLY - KEEP YELLOW COPIES FOR AT LEAST ONE YEAR.

Date of AKC S.T.A.R. Puppy® Test ____________ Organization (club name, etc) ___________________

Please mark the ONE category that best describes the provider of the AKC S.T.A.R. Puppy classes/test:

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

City/State/ZIP of CGC™ Test ______________________________________________________________

Evaluator __________________________ Approved CGC Evaluator Number (Required) _____________
(Evaluators for AKC S.T.A.R. Puppy Program must be Approved CGC Evaluators)

☐ Check here if this is a new address.

Address ______________________________________________________________________________

City ___________________________ State __________________ Zip________________________

Phone __________________________ Email ______________________

<table>
<thead>
<tr>
<th>How many puppies entered?</th>
<th>_______</th>
<th>_______</th>
<th>Purebred</th>
<th>_______</th>
<th>Mixed breed</th>
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<td>Total</td>
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<tr>
<th>How many puppies passed the test?</th>
<th>_______</th>
<th>_______</th>
<th>Purebred</th>
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<th>Mixed breed</th>
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I have the required experience for conducting AKC S.T.A.R. Puppy 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 CGC and AKC S.T.A.R. Puppy evaluator materials. I am an AKC-approved CGC evaluator. I am not suspended from AKC.

____________________________________
Evaluator Signature

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

SEND THIS ORIGINAL COPY TO AKC
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City ___________________________________ State ______________________ Zip____________

Phone _________________________________ Email _________________________________

How many puppies entered? ________ Purebred ________ Mixed breed

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GK9S11 (3/15)