



American CAL & TAN Organization

Arm Band #

American Certificate of Aptitude to Work ACAL

Test host: _____

date of test: _____

City: _____ State: _____ Zip: _____

Owner: _____ phone number: _____

(Please Print)

Address: _____ City: _____ State: _____ Zip: _____

Email address: _____

Testing for ACAL1 ☐ ACAL2 ☐ ACAL3 ☐

(dog cannot complete for ACAL2 and/or ACAL3 unless it has passed the previous ACAL1 and/or ACAL2 test)

Register name of dog: _____

(List all titles & degrees)

Call name: _____ Registry(s) & No(s): _____

Breed of Dog: _____

Date of Birth: _____ Sex of dog: Male ☐ Female ☐ Altered: yes ☐ no ☐

(dog must be 12 months old)

Color/ markings of dog: _____

Owner Signature _____ Date: _____

Official use only

Evaluator name: _____

(Please print)

Evaluator Number: _____

Evaluator Signature: _____

Payment info

Cash ☐ \$ _____

Check ☐ check # _____ (check made out to Host Organization)

Pre paid by PayPal ☐ \$ _____

Evaluation

1. Indifference to firearm noise (ACAL1) Pass ☐ Fail ☐

2. Friendly Stranger (ACAL1) Pass ☐ Fail ☐

3. Defense of handler (ACAL1) Pass ☐ Fail ☐

4. Attack hidden threat (ACAL2) Pass ☐ Fail ☐

5. GIP and bite (ACAL2 & 3) Pass ☐ Fail ☐

6. Stick hits (ACAL3) Pass ☐ Fail ☐

7. Out command (ACAL3) x2 Pass ☐ Fail ☐

8. Re-attack (ACAL3) Pass ☐ Fail ☐

*Dog must pass all evaluations to earn certification title **three commands allowed per "out" on ACAL3