

PUPPY RAISER MONTHLY REPORT # 1

Name _____ Date _____

Puppy's name _____

Puppy's height _____ Weight _____

Does your puppy react to his/her name? _____ yes _____ no
How? _____

Is your puppy responding to housetraining? _____ yes _____ no
Number of accidents a week? _____

Does your puppy know these commands? a-always s-sometimes n-never
i-introduced:

heel _____ sit _____ no _____ kennel _____ come _____ take a break _____

Any other commands, please list

How does your puppy react to:

Children _____

Adults _____

Other dogs _____

Correction _____

Grooming (brushing, bathing, nail trimming, etc.) _____

Riding in a vehicle _____

Any other important information about your puppy? _____

Has your puppy had any medical care? _____, If yes, please list _____

Additional information:

If you would like a call from the Puppy Raiser Coordinator please mark_____.