



# Scent Discriminate K9 Search Deployment Report

K9 Trailing Search Deployment Data Report

\* Indicates required question

Date of Deployment \*

Date

mm/dd/yyyy

Handler First Name \*

Your answer

Handler Last Name \*

Your answer

Email \*

Your answer

K9 Name \*

Your answer

Trail Age - Unit of Measurement \*

- Minutes
- Hours
- Days

Trail Age - Amount (# of Units Selected in the Previous Field) \*

Your answer

Trail Length (# of miles, yards, or feet) \*

Your answer

Deployment Type \*

- Missing Person
- Criminal

Person \*

- Adult
- Youth

Special Needs of Missing Person \*

- Alzheimer's Disease or Dementia
- Autism
- Mental Health Crisis
- Runaway
- None
- Other:

Scent Collection Method \*

- SEKR
- Kit
- Direct
- Swipe
- Direct - no kit
- Swipe - no kit

Trailed To Person \*

- Yes
- No

Followed Trail and Collected Evidence \*

- Yes
- No

Confirming Agency: (Name of Agency, City, County) \*

Your answer

Type of Agency \*

- SO
- PD
- EMA
- Other:

State: (2 letter abbreviation) \*

Your answer

Notes: (additional deployment details that are significant or memorable such as, environmental conditions, locations, traffic, etc. )

Your answer

Would you like for Scent Evidence K9 to post about your K9 Search Deployment? \*  
We will not use any case addresses, names, or location names with the exception of the handler and K9 unless otherwise instructed.

- Yes, please post about our search success!
- No

If you answered yes to the above question, please send a photo from the search or of you and your K9 along with a copy of this report to [joablanton@scentevidencek9.com](mailto:joablanton@scentevidencek9.com).

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