



# Maine Criminal Justice Academy

## K-9 / Handler Team Application

Applicant's Name: \_\_\_\_\_  
(Last) (First) (MI)

Address: \_\_\_\_\_  
(P.O. Box/Street) (City) (State) (Zip)

Telephone: (Work) \_\_\_\_\_ (Home) \_\_\_\_\_ (Cel) \_\_\_\_\_

Department: \_\_\_\_\_ Tel # \_\_\_\_\_

Address: \_\_\_\_\_  
(P.O. Box/Street) (City) (State) (Zip)

K-9's Name: \_\_\_\_\_ Breed: \_\_\_\_\_

**Training discipline of K-9**

Patrol

Detector

**Detector Training:**  Drug  Accelerant  Cadaver Scent  Explosives  Article

Fish & Wildlife  Tracking (W/O Apprehension)

Total number of months and/or years working with the above named K-9: \_\_\_\_\_

Enclose a copy of the curriculum of the course and also a copy of the certificate of completion of that course Also include a copy of the documentation of hours trained during the course.

Date of Field Test: \_\_\_\_\_ Location of Field test: \_\_\_\_\_

Person/Agency who conducted Test: \_\_\_\_\_  Pass  Fail

Person/Agency administering written exam \_\_\_\_\_  Pass  Fail

Enclose a letter from the administrator of the department verifying that the applicant is a K-9 Handler and meets the requirements of Specification 17 and or 18