

# OFFICIAL TEXAS 4-H TRIAL SCORE SHEET

(This score sheet must be used for score to count toward 4-H certificate program)

OPEN: \_\_\_\_\_ (A or B)

SHOW: \_\_\_\_\_ DATE: \_\_\_\_\_

BREED: \_\_\_\_\_ ARM BAND NO: \_\_\_\_\_

(NOTE: If a dog receives a non-qualifying score for any exercise, (NQ) should be recorded in points-off column. Total Score need not be given. NQ may be put in Total Score column.) Dogs need not receive qualifying score for ribbons or prizes but must receive qualifying score for points toward high point. Must receive a qualifying score to count for certificate program

| EXERCISE                                                           | NON-QUALIFYING (NQ)                                                                                                                                                                                                                                                                                                                                                             | QUALIFYING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Max. Points | Points Lost | NET SCORE |
|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-----------|
| HEEL OFF LEASH<br><br>THEN<br>FIGURE 8                             | Heel Fig 8                                                                                                                                                                                                                                                                                                                                                                      | Heel Fig 8                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 40          |             |           |
|                                                                    | Unmanageable..... <input type="checkbox"/> ..... <input type="checkbox"/><br>Unqualified heeling..... <input type="checkbox"/> ..... <input type="checkbox"/><br>Handler continually adapts<br>pace to dog..... <input type="checkbox"/> ..... <input type="checkbox"/><br>Constant tugging on leash<br>or guiding..... <input type="checkbox"/> ..... <input type="checkbox"/> | Forging..... <input type="checkbox"/> Crowding..... <input type="checkbox"/> ..... <input type="checkbox"/><br>Lagging..... <input type="checkbox"/> Sniffing..... <input type="checkbox"/> ..... <input type="checkbox"/><br>No sits..... <input type="checkbox"/> Poor sits..... <input type="checkbox"/> ..... <input type="checkbox"/><br>Extra commands to heel..... <input type="checkbox"/> ..... <input type="checkbox"/><br>Sluggish pace..... <input type="checkbox"/> ..... <input type="checkbox"/><br>Handler errors..... <input type="checkbox"/> ..... <input type="checkbox"/> |             |             |           |
| DROP ON<br>RECALL                                                  |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 30          |             |           |
|                                                                    | Didn't come on first<br>command or signal..... <input type="checkbox"/><br>Anticipated..... <input type="checkbox"/><br>Extra command to stay..... <input type="checkbox"/><br>Sat out of reach..... <input type="checkbox"/><br>Failure to drop..... <input type="checkbox"/>                                                                                                  | No front sit..... <input type="checkbox"/> Poor sit..... <input type="checkbox"/><br>No finish..... <input type="checkbox"/> Poor finish..... <input type="checkbox"/><br>Extra command to finish..... <input type="checkbox"/><br>Failure to come at brisk pace..... <input type="checkbox"/><br>Handler error..... <input type="checkbox"/><br>Slow to drop..... <input type="checkbox"/>                                                                                                                                                                                                    |             |             |           |
| RETRIEVE<br>ON FLAT                                                |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 20          |             |           |
|                                                                    | Fails to go out on command..... <input type="checkbox"/><br>Anticipated..... <input type="checkbox"/><br>Extra command..... <input type="checkbox"/><br>Sat out of reach..... <input type="checkbox"/>                                                                                                                                                                          | Slow: Going..... <input type="checkbox"/> Returning..... <input type="checkbox"/><br>Mouthing..... <input type="checkbox"/> Dropping..... <input type="checkbox"/><br>Directly to dumbbell..... <input type="checkbox"/><br>No sit..... <input type="checkbox"/> Poor sit..... <input type="checkbox"/><br>Anticipated finish..... <input type="checkbox"/><br>No finish..... <input type="checkbox"/> Poor finish..... <input type="checkbox"/>                                                                                                                                               |             |             |           |
| RETRIEVE<br>OVER THE<br>HIGH JUMP                                  |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 30          |             |           |
|                                                                    | Fails to go out on command..... <input type="checkbox"/><br>Anticipated..... <input type="checkbox"/><br>Extra command..... <input type="checkbox"/><br>Sat out of reach..... <input type="checkbox"/><br>Fails to jump going or returning..... <input type="checkbox"/><br>Climbs jump..... <input type="checkbox"/>                                                           | Slow: Going..... <input type="checkbox"/> Returning..... <input type="checkbox"/><br>Mouthing..... <input type="checkbox"/> Dropping..... <input type="checkbox"/><br>Directly to dumbbell..... <input type="checkbox"/><br>No sit..... <input type="checkbox"/> Poor sit..... <input type="checkbox"/><br>Anticipated finish..... <input type="checkbox"/><br>No finish..... <input type="checkbox"/> Poor finish..... <input type="checkbox"/><br>Pause or hesitates to jump..... <input type="checkbox"/>                                                                                   |             |             |           |
| BROAD<br>JUMP                                                      |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 30          |             |           |
|                                                                    | Anticipated command..... <input type="checkbox"/><br>Extra command to stay..... <input type="checkbox"/><br>Sat out of reach..... <input type="checkbox"/><br>Failed to jump on command..... <input type="checkbox"/><br>Does not jump full distance..... <input type="checkbox"/>                                                                                              | No front sit..... <input type="checkbox"/> Poor sit..... <input type="checkbox"/><br>No finish..... <input type="checkbox"/> Poor finish..... <input type="checkbox"/><br>Touches jump..... <input type="checkbox"/> Poor return..... <input type="checkbox"/><br>Extra command to finish..... <input type="checkbox"/><br>Handler error..... <input type="checkbox"/><br>Hesitated to jump..... <input type="checkbox"/>                                                                                                                                                                      |             |             |           |
| <b>MAXIMUM SUB-TOTAL</b> <small>JHW</small>                        |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>140</b>  |             |           |
| SIT AND<br>STAY<br>(3 MIN)<br><small>Handler out of Sight</small>  |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 30          |             |           |
|                                                                    | Did not remain in place..... <input type="checkbox"/><br>Goes to another dog..... <input type="checkbox"/><br>Repeated whines or barks..... <input type="checkbox"/><br>Stood or laid down..... <input type="checkbox"/>                                                                                                                                                        | Minor move before handler<br>returned..... <input type="checkbox"/><br>Minor move after handler returns to<br>heel position..... <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                      |             |             |           |
| DOWN AND<br>STAY<br>(5 MIN)<br><small>Handler out of Sight</small> |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 30          |             |           |
|                                                                    | Did not remain in place..... <input type="checkbox"/><br>Goes to another dog..... <input type="checkbox"/><br>Repeated whines or barks..... <input type="checkbox"/><br>Stood or laid down..... <input type="checkbox"/>                                                                                                                                                        | Minor move before handler<br>returned..... <input type="checkbox"/><br>Minor move after handler returns to<br>heel position..... <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                      |             |             |           |
| <b>MAXIMUM POINTS</b>                                              |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>200</b>  |             |           |
| <b>MISCELLANEOUS PENALTY</b>                                       |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |             |           |
| <b>TOTAL NET SCORE</b>                                             |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |             |           |

(The following only needs to be filled in if a Qualifying Score AND is to be used for 4H Certificate Program)  
 (Be sure to copy before sending original in for Certificate)

JUDGE'S NAME (please print): \_\_\_\_\_

JUDGE'S SIGNATURE: \_\_\_\_\_

4H'er NAME (please print): \_\_\_\_\_

DOG'S NAME (please print): \_\_\_\_\_