

## Puppy Sitter's Evaluation Sheet

Puppy's Name:	Date of Sitting From-To:
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We hope that you found this experience enjoyable and we appreciate your willingness to help puppy sit for one of our precious little friends. We would appreciate if you would take the time to fill out this form and return to the Puppy Raisers and send a copy to your Area Coordinator, Vicki Hennig, at [vhennig@seeingeye.org](mailto:vhennig@seeingeye.org). If you have any comments or ideas you would like to share with us please feel free to call The Seeing Eye Puppy Development Department (1-800-539-4425) as we are always open to new ideas.

Please place a check mark in the appropriate box for your answer.

	Poor	Average	Good	Excellent
<b>Puppy's behavior</b>				
How was the puppy's appetite?				
How were the puppy's house manners?				
How was the puppy's park time?				
How was the puppy's sleep time?				
How was the puppy's behavior?				
How well did the puppy listen to his/her commands?				
How was the puppy's health?				
How did the puppy get along with your pets?				
How was the puppy with your family members?				
How was the puppy on any outings?				

**Summary Comments**

Please let us know about your puppy sitting experience?

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Is there any other supplies or information you would have liked to have had prior to puppy sitting?

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**Your devotion to our mission and your dedication to following The Seeing Eye's policy help ensure each puppy the best chance to become a working guide dog in the future.**

**THANK YOU!**