

Kennel _____

Address _____

Phone _____

Website _____

Facility

Fencing	Needs Improvement	1	2	3	4	5	Very Secure
Cleanliness	Needs Improvement	1	2	3	4	5	Very Clean
Safety	Needs Improvement	1	2	3	4	5	Very Safe

Staff

Interaction with my dog	Little to no interaction	1	2	3	4	5	Friendly and enthusiastic
Hours of supervision	Insufficient for my dog	1	2	3	4	5	Excellent amount of supervision
Hours/type of exercise	Insufficient for my dog	1	2	3	4	5	Excellent exercise for my dog

Health and Nutrition

Does the staff accommodate special diets? _____

Will the staff medicate my dog? _____

Is there an additional cost? _____

	Total Score
--	--------------------

Miscellaneous

Does the kennel provide reports at the end of the stay? _____

Special amenities and services _____

Extra cost _____

Does the kennel offer a way to monitor or check on my pet? _____

Daily Schedule

Notes
