



CBRR&R AGGRESSION & BITE EVALUATION FORM

Date: _____

Evaluator Name: _____

Dog's Name: _____

Location of Evaluation: _____

Classification: Dominance

Not Applicable

Mild

Severe

Extreme

Evaluator's Notes

Classification: Territorial

Not Applicable

Mild

Severe

Extreme

Evaluator's Notes

Classification: Fear

Not Applicable

Mild

Severe

Extreme

Evaluator's Notes

Approved 2/26/2023

Classification: Predatory Not Applicable

Mild

Severe

Extreme

Evaluator's

Chesapeake Bay Retriever Relief & Rescue

Notes _____

Classification: Pain

Not Applicable

Mild

Severe

Extreme

Evaluator's Notes

BITE HISTORY (COMPLETE ONLY IF THERE IS A BITE INCIDENT)

Has the dog bitten? Yes No

1. If yes, describe in detail the events of the bite incident

2. Using Ian Dunbar's Bite Grading scale, what was the level of the bite?

Level 1 Level 2 Level 3 Level 4 Level 5 Level 6 Unknown

3. Was the bite incident conveyed to you by someone that witnessed the behavior? Yes No

4. If the answer is no, who gave you the details and how did they hear about

them? _____ 5.

Does the dog have any known prior history of biting? Yes No

Chesapeake Bay Retriever Relief & Rescue

6. If yes, give Details _____

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7. What is the current observed demeanor of the dog? (Without approaching it) Friendly Timid Depressed Aggressive Other _____

8. On approaching it, how does it respond?

Friendly Timid Depressed Aggressive Other _____

9. How does it respond to others, preferably someone it knows or is familiar with? Friendly Timid Depressed Aggressive Other _____

10. Give any other information that you feel would help in making a determination _____

Member's Recommendation: Accept Do Not Accept

Signed: _____

Printed Name: _____