



The Foundation for Pet Provided Therapy
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 info@loveonaleash.org

Supervised Visits Log

Note: Your Control Evaluation is to be completed before starting your supervised visits.
 Document a minimum of ten visits.
 Include this completed Log in your application for certification.
 Supervised visits must be completed within one year from date of control evaluation.

Pet's Name _____ Breed _____ Age ____ (at least 12 months)

Pet's Owner/Handler's Name _____

Chapter Name/Location _____

Visit	Date	Length of Visit	Facility/Event	Activity Performed	Comments/Contacts
1 <i>(example)</i>	5-21-06	60 minutes	Meadows Retirement Home Of Milwaukee	Regularly scheduled weekly visit	Fido seemed to really enjoy his first visit.
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					