The Dog Log

ACUC #: _____ Room #: _____

Investigator: _____ Single-housed Animal #: _____

EE Contact: _____ Date of Single Housing: _____

		Check all boxes that apply								
		Location			Human Interaction					
Initial	Date	In Cage	Out of Cage	Out of Cage, Out of Room	Toy(s)	Treat(s)	Exercise/Play	Training Session	Enrichment Device	Duration