



## Barking Muzzle Exemption Application form

To be submitted with the Barking Muzzle Exemption Application form (webform)

### Behavioural Modification Program

To be completed by the Behavioural Assessor

Greyhound Name		Microchip Number	
Ear Brand		Assessment Date	
Person in Charge <sup>1</sup>		Person in Charge Contact Number	
Kennel Address			
Behavioural Assessor Name		Behavioural Assessor Contact Number:	
Behavioural Assessor Qualification	<input type="checkbox"/> Qualified veterinary behaviourist VB# _____ <input type="checkbox"/> Qualified veterinarian VB# _____ <input type="checkbox"/> Qualified dog obedience trainer <sup>2</sup>		
Assessment Location (If not normal kennel address listed above)			
<b>Training to use BMP</b> List all individuals who received training to ensure the BMP is carried out appropriately. Please ensure correct spelling of names -Add lines if required			
Training date: _____			
Person in Charge		*Responsible Person 3	
Responsible Person <sup>3</sup> 1		*Responsible Person 4	
Responsible Person 2		*Responsible Person 4	

<sup>1</sup> Person in Charge mean – person who takes ultimate responsibility for the care and welfare of the greyhound. May be owner/trainer/breeder or another licensed person.

<sup>2</sup> Must have completed QRIC Qualified Dog Obedience Trainer Registration Form (Part 2)

<sup>3</sup> Responsible person means – person/s responsible for applying and monitoring barking muzzle use.



### Behavioural Modification Program

Commencement date: \_\_\_\_\_

Review/expiry date<sup>4</sup>: \_\_\_\_\_

Predicted end date<sup>5</sup>: \_\_\_\_\_

Has this greyhound been subject to a previous Behaviour Modification Plan? **yes/no**

If **yes**, please confirm you have reviewed a copy of the previous plan and describe why the greyhound requires additional training:

Describe the approved anti-barking device and insert an image of it correctly fitted on the dog named above:

<sup>4</sup> Must not exceed six months from commencement date

<sup>5</sup> The 'Predicted end date' is the date the Behavioural Assessor believes the greyhound will no longer be required to wear a barking muzzle.



**Frequency of barking  
muzzle use (e.g. daily)**

**Duration of barking  
muzzle use (must not  
exceed 60 mins per day)**

**Describe behavioural modification activities aimed at removing the need for continued barking muzzle use.**

You must include:

- Step by step instructions, frequency and duration of activities
  - Greyhounds must NOT wear an anti-barking device for more than a total of 60 minutes per day, and no more than 30 minutes at any given time.
- Milestones and indicators for reduction in barking muzzle use

Add pages if required