

# NCAST-AVENUW

## Teaching Recertification Form

### Third Attempt

Name \_\_\_\_\_  
Please Print

City \_\_\_\_\_

Instructor \_\_\_\_\_ Present Test Date \_\_\_\_\_

Directions: Place an X in the box next to each number your rated the caregiver and child a "NO". Repeat for each Teaching Reliability Tape example (#1-5). When you are done turn this form into your instructor with your five original Teaching scales attached. **Please attach a check, credit card #, or PO# for \$15 to cover the cost of processing your third attempt.**

	#1	#2	#3	#4	#5
1.					
2.					
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35.					
36.					

SENSITIVITY TO CUES

RESPONSE TO CHILD'S DISTRESS

SOCIAL-EMOTIONAL GROWTH FOSTERING

	#1	#2	#3	#4	#5
37.					
38.					
39.					
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73.					

COGNITIVE GROWTH FOSTERING

CLARITY OF CUES

RESPONSIVENESS TO CAREGIVER