Parish: Choose an item. Site Name:       Classroom Code:

Teacher Last Name:       Teacher First Name:

Observer Last Name:       Observer First Name:

**Infant 3rd Party CLASS Observation Feedback**

|  |  |
| --- | --- |
| Relational Climate: |  |
| Teacher Sensitivity: |  |
| Facilitated Exploration: |  |
| Early Language Support: |  |
| Total Domain Average: |  |

**Highest Score**: Choose an item.

|  |
| --- |
|  |

**Lowest Score:** Choose an item.

|  |
| --- |
|  |