

# NCAST PCI

## Teaching Recertification Form

### Third Attempt

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

City \_\_\_\_\_

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

Directions: Place an X in the box next to each number you rated the caregiver and child a "NO". Repeat for each Teaching Reliability Dyad (#1-5). When you are finished turn this form in to 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
SENSITIVITY TO CUES	1.				
	2.				
	3.				
	4.				
	5.				
	6.				
	7.				
	8.				
	9.				
	10.				
	11.				
RESPONSE TO CHILD'S DISTRESS	12.				
	13.				
	14.				
	15.				
	16.				
	17.				
	18.				
	19.				
	20.				
	21.				
	22.				
SOCIAL-EMOTIONAL GROWTH FOSTERING	23.				
	24.				
	25.				
	26.				
	27.				
	28.				
	29.				
	30.				
	31.				
	32.				
	33.				
	34.				
	35.				
	36.				

	#1	#2	#3	#4	#5
COGNITIVE GROWTH FOSTERING	37.				
	38.				
	39.				
	40.				
	41.				
	42.				
	43.				
	44.				
	45.				
	46.				
	47.				
CLARITY OF CUES	48.				
	49.				
	50.				
	51.				
	52.				
	53.				
	54.				
	55.				
	56.				
	57.				
	58.				
RESPONSIVENESS TO CAREGIVER	59.				
	60.				
	61.				
	62.				
	63.				
	64.				
	65.				
	66.				
	67.				
	68.				
	69.				
	70.				
	71.				
	72.				
	73.				