

Missouri Ozark Community Action, Inc  
Head Start

**Classroom Social/Emotional Observation**

Center: \_\_\_\_\_ Class: \_\_\_\_\_ Date: \_\_\_\_\_

Education Staff \_\_\_\_\_ Volunteers \_\_\_\_\_ Children Present \_\_\_\_\_

Was the classroom clean? \_\_\_ Classroom cluttered \_\_\_ Outlets covered \_\_\_\_\_

1. Were activities present in each area as identified on the weekly lesson plan?

Describe the activities:

Blocks \_\_\_\_\_

Creative Activities \_\_\_\_\_

Computer \_\_\_\_\_

Home Living \_\_\_\_\_

Library \_\_\_\_\_

Manipulative \_\_\_\_\_

Sand & Water \_\_\_\_\_

Writing Center \_\_\_\_\_

2. Activities and materials were ready for the children? \_\_\_\_\_

4. Were the activities based on DAP? \_\_\_\_\_

5. Was the Lesson plan posted? \_\_\_\_\_ Was the lesson plan being followed? \_\_\_\_\_

6. Was the daily schedule being followed? \_\_\_\_\_

7. Were the classroom rules reviewed and positive guidance given throughout the day for infractions?

Observation:

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8. Were appropriate tones and techniques used with children?

Observation:

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9. Was staff actively engaged with children?

Observation of at least two incidents one each indoors and outdoors

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10. Staff were individualizing with children? Give example: \_\_\_\_\_

11. Children's artwork was displayed? \_\_\_\_\_

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12. List three Early Literacy activities you observed.

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Observers Comment:

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Center Comments:

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Center Staff Signature: \_\_\_\_\_

Signature of Observer: \_\_\_\_\_ Date: \_\_\_\_\_

Follow up needed: Yes \_\_\_ No \_\_\_ Follow up Date: \_\_\_\_\_