

Instrument 3: Direct Observation Checklist

Daily Observation Checklist

Student Name: _____
Class and Number
Date of Direct observation: ____/____/____ Made by: _____

Behaviours	Yes	No	Comments
1.S/he doesn't miss class. (Social Skill)			
2. S/he's on time. (Social Skill)			
3. S/he dresses appropriately for the weather. (Social Skill)			
Does s/he have any dietary restrictions. (Cultural - Health)			
S/he is able to communicate. (Social Skill)			
S/he is capable of following instructions. (Cognitive Skills)			
S/he seeks help when she cannot understand a task or activity. (Relational Skill)			
S/he's able to concentrate on the tasks. (Cognitive Skills)			
S/he's empathic. (Social and Relational Skills)			
She interacts with her colleagues peacefully (Social and Relational Skills)			
S/he recognizes your feelings (Relational Skill)			
S/he apologizes when she makes a mistake. (Social Skill)			
S/he cries often. (Emotional Mood)			
S/he often feels apathetic. (Emotional Mood)			
S/he has mood swings (Emotional Mood)			
S/he's aggressive. (Emotional Mood)			