

FACILITY VISIT

Facility Name: Home Sweet Home Child Care

Date: 03/12/2021

Time: 09:57

Provider: _____

Certificate #: 001398

Phone: 307-234-3460

Address: 1971 Glendo

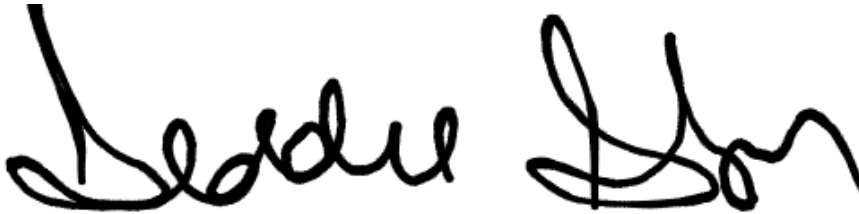
City: Casper

Facility Type: ___ FCCH FCCC ___ CCC

Comments/TA Provided:

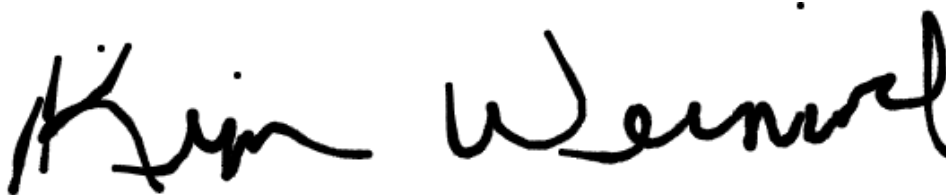
Required unannounced visit. There are 10 children present at time of visit. There are 8 children with Kim and 2 with Cody. Otto 1, Ted 4, Emma 2, Jake 3, Rhett 3, Addison 3, Kennedy 4, Breckyn 1 Calvin infant, Blakely 2 (these two are with Cody. Discussed expiring items. Kim has 15 children enrolled at this time. They are getting ready for lunch in a little bit. They haven't had any changes or illnesses. Things are going great. Received current health inspection. Kim has a few kids on the waiting list and they will start towards when school starts. Please call me with any questions. Thank you!

Director/Provider:



Date: 03/12/2021

Childcare Licensor:



Date: 03/12/2021