

FACILITY VISIT

Facility Name: Home Sweet Home Child Care

Date: 08/24/2021

Time: 10:00

Provider: _____

Certificate #: 001398

Phone: 307-234-3460

Address: 1971 Glendo

City: Casper

Facility Type: ___ FCCH FCCC ___ CCC

Comments/TA Provided:

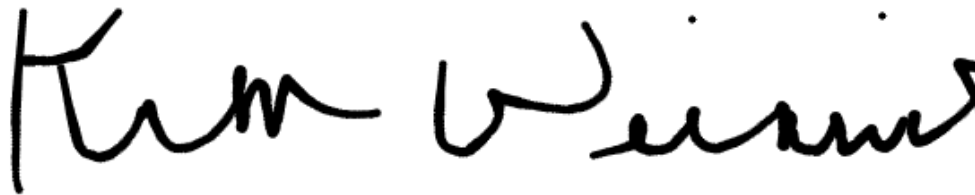
An unannounced visit to facility to deliver license. There are 14 children present Charlie 2, Brekkyn 2, Carter 3, Blakely 2, Jakob 4, Ted 5, Jordan 5, Cambry 4, Otto 2, Cal infant, Kai 1, Rhett 4, Addison 3, Emmy 3 with two staff Kim and Cody. Children are playing blocks. Discussed the rule meeting they tried to get into the last one but had difficulty so will attend the training tonight. Please call me with any questions Thank you!

Childcare Licensor:



Date: 08/24/2021

Director/Provider:



Date: 08/24/2021