FACILITY VISIT

Facility Name: <u>Lala's Littles</u> Date: <u>11/10/2020</u> Time: <u>10:15</u>

Provider: Certificate #: <u>014878</u> Phone: <u>307-630-5406</u>

Address: <u>740 Everglade</u> City: <u>Cheyenne</u>

Facility Type: ___ FCCH X_FCCC ___ CCC

Comments/TA Provided:

Compliance monitoring visit to check staff records. All records are in compliance. Discussed the need for a sub and ideas on how to possibly get some interest or someone and how to qualify someone on the sub list. Ratios: 2:12 1 infant, 2 1 year olds, 6 two year olds, 3 four year olds. Facility looks good.

Dicrector/Providor:

Date: <u>11/10/2020</u>

Childcare Licensor:

Date: 11/10/2020