

FACILITY VISIT

Facility Name: True North Academy

Date: 01/07/2022

Time: 08:30

Provider: _____

Certificate #: 014960

Phone: 307-586-2335

Address: 1619 Stampede Ave

City: Cody

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Infant room: 4-infant, 1-1YO: 2 staff, 7-1/2YO: 2 staff, 8-3YO: 2 staff, 4-4/5YO: 1 staff. Facility walk through completed.
Emailed CCL301 in error.

Childcare Licensor:



Date: 01/07/2022

Director/Provider:



Date: 01/07/2022