

FACILITY VISIT

Facility Name: ABSAROKA HEAD START BASIN-GREYBULL

Date: 05/05/2021

Time: 10:34

Provider: _____

Certificate #: 001506

Phone: 307-568-2032

Address: 609 RUE AVE.

City: Basin

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

8-3/4/5YO: 4 staff. Observed group activity and transition to stations. Playground inspection completed. Pea gravel is appropriate depth and playground equipment is safe. Last day of school May 28, 2021.

Director/Provider:



Date: 05/05/2021

Childcare Licensor:



Date: 05/05/2021