

FACILITY VISIT

Facility Name: JH Discovery Preschool

Date: 09/29/2022

Time: 09:45

Provider: _____

Certificate #: 001590

Phone: 307-733-7547

Address: 175 West Snow King #5

City: Jackson

Facility Type: ___ FCCH FCCC ___ CCC

Comments/TA Provided:

Unannounced visit. Attendance record verified with children present. PRESCHOOL GROUP: (1) staff and (1) special education therapist and (7) children present. Ages: (1) age 3, (4) age 4, (2) age 5. Children are participating in . free play. Staff:child ratio and supervision checked. Staff records checked prior to visit and verified at visit. We discussed all upcoming expiring items and policy handbook. Facility hours were verified to be current. Licensor provided a policy handbook checklist and fingerprint cards/forms. TA provided for a needed variance for visiting therapists.

Childcare Licensor:



Date: 09/29/2022

Director/Provider:



Date: 09/29/2022