

FACILITY VISIT

Facility Name: LIL RASCALS

Date: 05/29/2020

Time: 12:54

Provider: _____

Certificate #: 001840

Phone: 307-258-8927

Address: 5220 Antelope

City: Bar Nunn

Facility Type: ___ FCCH FCCC ___ CCC

Comments/TA Provided:

Virtual visit completed this date, licenser observed ratio, approved spaces, attendance, and staff/provider qualifications. Please call STARS to have them add staff orientation in the database. Discussed the recommendation in the order for COVID that staff wear masks. 10 kids today 2 under two years old w/Tammy and Nancy.

Director/Provider:

Ashley Darnell

Date: 05/29/2020

Childcare Licensor:

Virtual visit

Date: 05/29/2020