FACILITY VISIT

Facility Name: Imagination Destination

Provider:

Address: 6503 Faith Drive

Date: 05/12/2022 Certificate #: <u>001983</u> City: Cheyenne

Time: <u>01:23</u> Phone: <u>307-634-6904</u>

Facility Type: ____ FCCH ____ FCCC X_CCC

Comments/TA Provided:

Visit to check staff requirements. One annual WY C.R. has not come back yet that Staff has a variance. Ratios checked in all classrooms compliant. TA: Remember that when using relaxed ratios, if one child awakens in a classroom regular ratios must be resumed.

Childcare Licensor:

Dicrector/Providor:

Date: 05/12/2022

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