FACILITY VISIT

Facility Name: YWCA Early Care Center Date: 11/01/2022 Time: 04:15

Provider: _____ Certificate #: <u>002036</u> Phone: <u>307-352-6635</u>

Address: 1037 Jackson Street City: Rock Springs

Facility Type: ___ FCCH ___ FCCC X_CCC

Comments/TA Provided:

The children are having a good day. Children have a variety of toys to play with and share well with each other. Staff is attending to the needs of the children. Ratios and attendance were checked. The outside play area is in use. Toddler room 1 had 6 children and 1 staff, aged 2 and 3 years Toddler/Infant room had 5 children all children are ages 0 to 2 years

Childcare Licensor:

O Endecast

Date: <u>11/01/2022</u>

Dicrector/Providor:

1-2

Date: 11/01/2022