

FACILITY VISIT

Facility Name: Hulett Preschool

Date: 10/27/2021

Time: 11:15

Provider: _____

Certificate #: 002065

Phone: 307-467-5727

Address: 429 Sager

City: Hulett

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Unannounced visit conducted. Provided important reminder card. One three year old & 9 four & five year olds - 10 total kids in care & 2 staff.

Childcare Licensor:



Date: 10/27/2021

Director/Provider:



Date: 10/27/2021