

FACILITY VISIT

Facility Name: Sunny Sprouts

Date: 08/17/2022

Time: 08:30

Provider: _____

Certificate #: 002165

Phone: 307-883-8690

Address: 95 C M R Lane

City: Etna

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

On 8/17/22 Technical Assistance Coach Penny Hotovec conducted a TA only visit with Jackie. Discussion included ratios, sign in sheets, outdoor play space and Wave 2 Grant funding. Penny shared sample sign in sheets and will confirm with Kelli that the option is acceptable.

Childcare Licensor:



Date: 08/17/2022

Director/Provider:



Date: 08/17/2022