

FACILITY VISIT

Facility Name: Shelia Adams

Date: 04/19/2022

Time: 01:30

Provider: _____

Certificate #: 002178

Phone: 307-682-4059

Address: 7301 Robin Drive

City: Gillette

Facility Type: ☒ FCCH ___ FCCC ___ CCC

Comments/TA Provided:

Unannounced visit conducted. Provided new rule book. 1 infant, 2 one year old, 1 two year old, 2 three year olds, 1 four year old & 1 five year old - 8 total children & 1 staff.

Childcare Licensor:



Date: 04/19/2022

Director/Provider:



Date: 04/19/2022