

FACILITY VISIT

Facility Name: EMILY'S DAYCARE

Date: 08/03/2021

Time: 02:05

Provider: _____

Certificate #: 002182

Phone: 307-532-2058

Address: 1709 EAST I ST.

City: Torrington

Facility Type: ☒ FCCH ___ FCCC ___ CCC

Comments/TA Provided:

Unannounced visit done. 8 children present, 1- 1 year old, 1- 3 year old, 2- 4 year olds, 2- 5 year olds, 1- 6 and 1- 7 year old. Fingerprint documents were left with Emily for and Cody's re- run of the prints. An internet connection was not established by the computer. The visit form was issued on 8/4.

Childcare Licensors:



Date: 08/04/2021

Director/Provider:

Date: 08/04/2021