FACILITY VISIT

Facility Name: Silly Bear Academy, LLC	Date: <u>02/18/2021</u>	Time: <u>11:30</u>
Provider:	Certificate #: <u>002195</u>	Phone: <u>307-369-1221</u>
Address: <u>117 W. 5th</u>	City: Cheyenne	

Facility Type: ____ FCCH ____ FCCC X_CCC

Comments/TA Provided:

Fire and health are in process. TA provided regarding the infant room for capacity and spacing. Jen will make some minor changes. Hanaging cord was corrected immediately. Discussed behavior and children who do not nap are in a quiet room with Libby to rest or do quiet activities. The ratios in each classroom were in compliance. Reviewed new staff files of Sarah and Jonah. Both were in compliance. You run a great program. Thanks for followng the Health order also.

Dicrector/Providor:

Date: <u>02/19/2021</u>

Childcare Licensor:

Mon

Date: 02/19/2021