

FACILITY VISIT

Facility Name: FIRST CHRISTIAN EARLY CHILDHOOD SCHOOL

Date: 09/18/2020

Time: 10:10

Provider: _____

Certificate #: 002204

Phone: 307-472-0649

Address: 520 CY AVE.

City: Casper

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

To new staff do not have a central registry screen, sent home during the visit. Received variance request. 12- 3-4yr olds w/Brooke and Max. 6-2-3yr w/Taryn. 11-4/5yr w/Haylee and Brianna.

Director/Provider:



Date: 09/19/2020

Childcare Licensor:



Date: 09/19/2020