

FACILITY VISIT

Facility Name: Alpine Child Development Center

Date: 09/21/2021

Time: 12:15

Provider: _____

Certificate #: 002283

Phone: 307-654-4116

Address: 247 Snake River

City: Alpine

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Unannounced visit. Attendance record checked and verified with children in attendance. (7) staff, (0) children present. Preschool has concluded for the day. A visit to observe children will be done in the next (30) days. Staff records checked prior to visit and verified to be compliant for Director and existing staff. (0) new staff have been hired since last visit. An updated CCL-205 was given to Licensor and facility hours were updated in the database. We discussed upcoming expiring items, training opportunities and upcoming Wyoming Cowboy Conference. (0) violations observed.

Childcare Licensor:



Date: 09/21/2021

Director/Provider:



Date: 09/21/2021