

FACILITY VISIT

Facility Name: Alpine Child Development Center

Date: 09/28/2022

Time: 10:20

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 present. (4) staff, (14) children present. Ages: (5) age 3, (9) age 4. Children are participating in small group. Staff:child ratio and supervision checked. Facility previously emailed a current CCL-205. Staff records checked prior to visit and verified at visit. We discussed all upcoming expiring items and policy handbook. Facility hours were confirmed to be correct.

Childcare Licensor:



Date: 09/28/2022

Director/Provider:



Date: 09/28/2022