

FACILITY VISIT

Facility Name: NEIGHBORHOOD CHILD CARING CENTER Date: 08/10/2022 Time: 10:06

Provider: _____ Certificate #: 002305 Phone: 307-265-2333

Address: 2200 Richard Street City: Casper

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Visit completed on this day. Discussed grant money, discussed new staff/non-staff summary, completed outdoor and indoor tour. Discussed new policy handbook and that it will be reviewed and sent back with any changes. Discussed if Tiffany still needed to post her DFS inspection and complaint information if its already posted in her policy. Ratios: Mixed ratios in both classrooms. infant/todderl: 3- under 1yo, 3-1yo, 2-2yo with Danielle and Amanda Outside classroom was 4-4yo, 2-5yo and 4-6=yo with Sam and Ali.

Childcare Licensor:



Date: 08/10/2022

Dicrector/Provider:



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