FACILITY VISIT

Facility Name: SAINT MARYS SCHOOL	Date: <u>06/04/2020</u>	Time: <u>11:20</u>
Provider:	Certificate #: <u>002314</u>	Phone: <u>307-638-9268</u>
Address: 2200 O'Neil Ave.	City: Cheyenne	

Facility Type: ____ FCCH ____ FCCC X CCC

Comments/TA Provided:

Visit to summer session which began on 6/1/2020. Need health inspection but is delayed due to COVID-19. FA/CPR is due in August regarding Kathleen. Staff records were current for the summer staff. Remember to get the health and safety completed if staff are not supervised by a qualifed staff person. Discussed sub qualifications when sharing with a different facility. No other concerns. Kathleen is working on obtaining all qualifications for the fall staff. Good Job! Kudos on the June fire drill!

and the

Date: <u>06/04/2020</u>

Dicrector/Providor:

Childcare Licensor:

Date: <u>06/04/2020</u>