

FACILITY VISIT

Facility Name: Excel Preschool

Date: 09/28/2022

Time: 01:04

Provider: _____

Certificate #: 002320

Phone: 307-326-5839

Address: 204 W Spring St

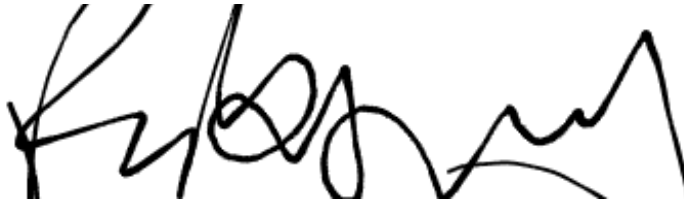
City: Saratoga

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Unannounced visit conducted on this day. Walkthrough of indoor and outdoor was completed. Ratios: 2-5yo and 6-4yo with Tammy and Lisa. Discussed staff who are subs and what their qualifications must be.

Childcare Licensors:



Date: 09/28/2022

Director/Provider:



Date: 09/28/2022