

FACILITY VISIT

Facility Name: Imagination Station Learning Center

Date: 05/26/2022

Time: 10:32

Provider: _____

Certificate #: 002335

Phone: 307-265-4230

Address: 440 Leird Lane

City: Evansville

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Unannounced visit completed this date. There are 4 infant-1 with Trina 6 1-2 with Shaylee and 10 3+with Coveney They are outside playing. Shaylee does not have current fingerprints on file which expired in January. Shaylee will be sent home until an approved variance can be received. Explained that they need to figure out staff requirements and assure that they are updated prior to expiration to avoid future violations. Whisper thinks that Shaylee had prints done for relative care I will check to see if they can be found and used. New rule book and rule tool given to Whisper. I will send the CCL-108 and waiver so that you have the current forms. Shaylee left at the time we were at the facility. Please call me with any questions. Thank you!

Childcare Licensor:



Date: 05/26/2022

Director/Provider:



Date: 05/26/2022