

FACILITY VISIT

Facility Name: CARBON COUNTY CHILD DEVELOPMENT CENTER Date: 09/29/2020 Time: 10:30
2

Provider: _____

Certificate #:
002387

Phone: 307-324-4951

Address: 1705 EDINBURGH

City: Rawlins

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

There are 13 children in attendance and 1 child at home taking class virtually at the time of the visit with three staff persons, Matthew, Malysa, and Matti (4 - 3 years old, 9 - 4/5 years old). Reviewed staff summary with secretary and updated all new staff that were hired, their hire dates, TB assessments, and CPR dates. Removed staff that are no longer employed at the facility. Updated facility hours of operation and checked all facility information. As part of compliance please have Mindy submit a new updated CCL 205 staff summary to child care licensing. Facility is all compliant at the time of the visit.

Director/Providor:



Date: 09/29/2020

Childcare Licensor:



Date: 09/29/2020