

FACILITY VISIT

Facility Name: FIRST UNITED METHODIST PRESCHOOL

Date: 09/14/2021

Time: 01:30

Provider: _____

Certificate #: 002390

Phone: 307-324-8434

Address: 800 N23rd Street

City: Rawlins

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Reviewed missing staff qualification at the time of the visit and Christina needs to complete out of state central registry for both Louisiana and for Tennessee. Provider states that she did not know that these needed to be sent in and submitted but will be submitting a variance request to allow Christina to continue to work while being supervised while awaiting results from these out of state central registry applications. There are a total of 11 children in classroom #3 at the time of the visit with two staff, Anna and Alecia (10 - 3 years old, 1 - 4 years old). There are a total of 13 children in attendance in classroom 2 at the time of the visit with 2 staff members, Kourtney and Annette (13 - 4/5 years old). There are a total of 4 children in attendance in classroom #1 at the time of the visit with Christina (2 - 3 years old, 2 - 4/5 years old). Reviewed that there are currently no variance on file for the facility. Discussed attending the cowboy conference. Issued the CCL 301 and 305 at the time of the visit.

Childcare Licensors:



Date: 09/14/2021

Director/Provider:



Date: 09/14/2021