FACILITY VISIT

Facility Name: Wyoming Child and Family Development Head Start Date: 09/23/2021 Time: 10:15

Provider: _____ Phone: <u>307-682-4214</u>

Address: 601 Running W Drive City: Gillette

Facility Type: ___ FCCH ___ FCCC X_CCC

Comments/TA Provided:

Morning classes in session at the time of the visit. Received updated ccl-205. 14:3, 18:3, 19:3

Childcare Licensor:

Date: <u>09/23/2021</u>

Dicrector/Providor:

Date: <u>09/23/2021</u>