

FACILITY VISIT

Facility Name: Holy Name Pre-Kindergarten - Clark

Date: 11/18/2021

Time: 09:45

Provider: _____

Certificate #: 002521

Phone: 307-672-2021

Address: 121 S Connor

City: Sheridan

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

12-4/5s with 2 staff and 11 3/4yrs with 2 staff at the time of the visit. Staff records complete. No compliance due.

Childcare Licensor:



Date: 11/18/2021

Director/Provider:



Date: 11/18/2021