

FACILITY VISIT

Facility Name: SUNSHINE CORNER

Date: 11/30/2023

Time: 09:41

Provider: _____

Certificate #: 001817

Phone: 307-266-5605

Address: 2303 EAST 15TH

City: Casper

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Unannounced visit to check playground. Some surfacing has been moved but still does not meet the use zone/depth requirements. Discussed different options. I will check with the leadership team to see if we can use the grass area which has variance approval for the winter months and redo the playground this summer. I will let Jennifer know. There are 10 children 3-5 with Jennifer, 3 infants with Makayla, 5 1 yr olds with Emily, and 4 2-3 yr olds with Angela. Reviewed file for Emily as she is new. Please call me with any questions. Thank you!

Childcare
Licensor:



Date: 11/30/2023

Director/Provider:



Date: 11/30/2023