

FACILITY VISIT

Facility Name: STRIDE LEARNING CENTER

Date: 10/01/2024

Time: 11:21

Provider: _____

Certificate #: 002309

Phone: 307-632-2991

Address: 326 PARSLEY BLVD.

City: Cheyenne

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Unannounced visit conducted on this date. New staff records checked during the visit and discussed staff qualifications. Facility was viewed and staff:child ratios and supervision were observed. Afternoon class sessions were just starting during the visit. there was 3 staff with 6 kids aged 4 and 5, 3 staff 2 kids aged four and five, 3 staff with 5 kids aged four and five, 3 staff with 5 kids aged 4 and 5.

Childcare Licensor:



Date: 10/01/2024

Director/Providor:



Date: 10/01/2024