

FACILITY VISIT

Facility Name: Nana's House

Date: 09/24/2019

Time: 10:45

Provider: \_\_\_\_\_

Certificate #: 001295

Phone: 307-335-5088

Address: 999 South 5th

City: Lander

Facility Type: \_\_\_ FCCH  FCCC \_\_\_ CCC

Comments/TA Provided:

Two staff, Kay and Gary, present with 3 children ages, under one, a one year old and and 18 month old. TA, discussed training requirements. Licenser promised to check STARS training records and assess what it needed. Email changed, entered in data base.

Director/Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Childcare Licensor: \_\_\_\_\_

Date: \_\_\_\_\_