

FACILITY VISIT

Facility Name: 3C'S DAYCARE CENTER

Date: 11/27/2018

Time: 12:47

Provider: _____

Certificate #: 001883

Phone: 307-431-8199

Address: 1209 CHARLES AVE

City: Worland

Facility Type: ☒ FCCH ___ FCCC ___ CCC

Comments/TA Provided:

10 Child care children plus one grandchild. Capacity exceeded by one child. Infant and one other child were unexpected today. Visit conducted at naptime, G rated movie playing. Grandchild was placed in care with Aunt. Violation for exceeding capacity was noted, CAP left with Sheila. Brainstormed about how to manage parent schedules and parents dropping off children when not expected.

Director/Provider: _____

Date: _____

Childcare Licenser: _____

Date: _____