

FACILITY VISIT

Facility Name: 3C'S DAYCARE CENTER

Date: 06/19/2019

Time: 11:45

Provider: _____

Certificate #: 001883

Phone: 307-431-8199

Address: 1209 CHARLES AVE

City: Worland

Facility Type: FCCH FCCC CCC

Comments/TA Provided:

Outside space was inspected, TA done for moving one piece from under the clothesline. Licenser and Sheila rearranged the little tikes pieces to make the space more usable. Too many choices were available, and pieces were grouped to help with child choice. Ratios and supervision was in compliance at time of visit.

Director/Provider: _____

Date: _____

Childcare Licensor: _____

Date: _____