

Initial Unannounced Full/Partial Follow-up Location Change Investigation Other _____

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Educational Playcare Date: 8/3/21 Time: 100

Location Address: 111 Merritt Blvd Trumbull Telephone #: 203 816 6252

e-mail address: ecole@educationalplaycare.com License #: 70462 Expiration Date: 12/31/22

Capacity: 269/104 # of Children Present: 59 # of Staff Present: 12

Consent to Inspect Family Child Care Home	<i>I agree to allow the Office of Early Childhood to have access to and inspect this facility and all child care records as required by Family Child Care Home Regulations. Provider/Applicant/Substitute's Signature _____</i>
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Purpose of visit: Follow up Case 2021-424

Observations/Corrections needed:

NS 19a-79-4a(c)(4)(D) - Staffing Supervision - No violations at this visit.

NS 19a-79-10(c)(2) - Under Threes Endorsement - Ratios - No violations at this visit.

S = Substantiated NS = Not Substantiated P = Pending (if applicable)

Operators/providers are required by regulations and statutes to be in compliance at all times.

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: N/A

Signature: [Signature]
(OEC Representative)

Print Name: Lauren Hill

Signature: [Signature]
(Person in Charge)

Print Name: Erica L. Cole