

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Generali Schools of Literature + The Arts Date: 11-30-21 Time: 1

Location Address: 1625 Straits Tpke., Middlebury Telephone #: 203-577-6900

e-mail address: literature@sgslobal.net License #: 16516 Expiration Date: 9-30-22

Capacity: 72 # of Children Present: 63 # of Staff Present: 12

**Consent to Inspect
Family Child Care Home**

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 _____

Purpose of visit: Case # 2021-846

Observations/Corrections needed:

P 19a.79.5a (a)(3)(A) - accident report pending

P 19a.79.4c (c)(4)(D) - supervision

P 19a.79.3c (b)(2) - meeting the needs of the child

P 19a.79.7a (b)(7) - new hire orientation

P 19a.79.7a (h)(7) - playground hazards

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: _____

Signature: _____

(OEC Representative)

Print Name: Kenn Eddy

Signature: _____

(Person in Charge)

Print Name: Kristin A. Generali