

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

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Right at School at Ridge Hill Date: 1-14-22 Time: 4:16pm

Location Address: 120 Carew Rd Hamden Telephone #: 203-993-5938

e-mail address: ridgchill@rightatschool.com License #: 70541 Expiration Date: 8-31-24

Capacity: 72 # of Children Present: 8 # of Staff Present: 2

<b>Consent to Inspect</b> <b>Family Child Care Home</b>	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 <u>N/A</u>
--	--

Purpose of visit: Partial Inspection - supervision to case 2021-447

Observations/Corrections needed:

19a-79-4a(c)(4)(D) Staffing; supervision

supervision in compliance 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: Jen Serra / Fil Montanye  
(OEC Representative)

Print Name: Jen Serra / Fil Montanye

Signature: Natasha Carter  
(Person in Charge)

Print Name: Natasha Carter