

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

**SUPPLEMENTAL REPORT OF INSPECTION**

Name of Program/Provider: Rise and Shine Nursery and Pre-K Academy Date: 4/6/22 Time: 8:40  
Location Address: 21 Newfield Ave. Hartford CT 06106 Telephone #: 860-357-8740  
e-mail address: ruseandshine@daycarellc License #: Pending Expiration Date: —  
Capacity: 37 # of Children Present: — # of Staff Present: —

<b>Consent to Inspect Family Child Care Home</b>	<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.</i> Provider/Applicant/Substitute's Signature: <u>—</u>
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Purpose of visit: Follow up to inspection conducted on 4/4/22

Observations/Corrections needed:

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No violations observed at time of visit

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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: [Signature]  
(OEC Representative)  
Print Name: Johanne Dalo

Signature: [Signature]  
(Person in Charge)  
Print Name: Giovanna Quispe de Ibarra