

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

**SUPPLEMENTAL REPORT OF INSPECTION**

Name of Program/Provider: Kindercare Learning Center Date: 8/17/22 Time: 9:15am

Location Address: 1445 Boston Post Rd Guilford Telephone #: 203-453-8781

e-mail address: maria.ferrigno@kindercare.com License #: 14257 Expiration Date: 6/30/25

Capacity: 88 # of Children Present: 61 # of Staff Present: 16+

**Consent to Inspect** I agree to allow the Office of Early Childhood to have access to and inspect this facility and all  
**Family Child Care Home** child care records as required by Family Child Care Home Regulations.  
Provider/Applicant/Substitute's Signature NA

Purpose of visit: Follow up to 8/10/22 inspection for #130

Observations/Corrections needed:

130 - in compliance at this visit all cribs observed  
to <sup>have</sup> be tight fitting sheets.

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: NA

Signature: [Signature]  
(OEC Representative)  
Print: Al Montanye

Signature: [Signature]  
(Permittee/Charge)  
Maria Ferrigno Director