

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

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Holy Cross Christian Preschool Date: 10/11/22 Time: 1pm  
Location Address: 5995 Main St. Trumbull, Ct. 06611 Telephone #: (203) 268-6471  
e-mail address: preschool@holycrosstrumbull.com License #: 13095 Expiration Date: 3.31.26  
Capacity: 43 # of Children Present: 17 # of Staff Present: 10

**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: Unannounced Partial

Observations/Corrections needed:

89 - Fence near pond measured 3ft (4ft required)

DISCUSSED  
2 of 8 tables measured 27-foot candles - program  
not using for close work.

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

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

Signature: A. R. Roberts / Terri R Roberts  
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 10.25.22

Signature: Michele Glennon  
(Person in Charge)  
Michele Glennon