

Connecticut Office of Early Childhood
Division of Licensing
450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103
Phone (800)282-6063 www.ctoec.org Fax (860)326-0552

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Kinder Care Learning Center Date: 10-24-23 Time: 1:56
Location Address: 3025 Dixwell Ave Hamden Telephone #: 203-248-8262
e-mail address: 301764@kicorp.com License #: 15871 Expiration Date: 3-31-25
Capacity: 168/88 # of Children Present: 93/55 # of Staff Present: 22

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 _____

Purpose of visit: Follow up to Inspection dated 10-4-23

Observations/Corrections needed:

OK #129 observed all infants under 12 months to be sleeping
in cribs. Infant in Toddler C is now 12 months and
sleeping on cot.

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: Jennifer I. Leve LeSerra
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: _____

Signature: Nicole Maiorino
(Person in Charge)