

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: Sunflower Family Learning Center Date: 11-14-23 Time: 9am
Location Address: 1470 Burnum Ave Bridgeport Telephone #: 203-945-1770
e-mail address: Sunflowerfamilylearningcenter@gmail.com License #: 70528 Expiration Date: 11-30-23
Capacity: 54 # of Children Present: 25 # of Staff Present: 9

Consent to Inspect Family Child Care Home	<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>NA</u>
--	--

Purpose of visit: Follow up on these 2 violations that were cited on 11-13-23

Observations/Corrections needed:

19a-79-3a (ensuring health and safety) - ✓

19a-79-3a(5)(10) - (supervision) - ✓

✓ = in compliance at this inspection

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: Cathy Anderson
(OEC Representative)
Maile Wilson
Signature: _____
(Person in Charge)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: NA