

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: Bright + Early children's Learning ^{Center} Date: 5/30/24 Time: 11am

Location Address: 861 Middle St. Middletown, CT 06457 Telephone #: 860-635-0519

e-mail address: Jenna@brightandearly.com License #: 15020 Expiration Date: 1/30/26

Capacity: 142/60 # of Children Present: 123 # of Staff Present: 23

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 - case 2024-328

Observations/Corrections needed:

PIC Jennifer Ames
(NS) 19a-79-4a(c)4(d) - Staffing - Supervision - Per Director program has
been adhering to supervision policy

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: Valeria Williams
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: J/A

Signature: _____
(Person in Charge)
Jennifer Ames