

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: 8-20-24 Time: 12:14

Location Address: 1470 Barnum Ave Bridgeport Telephone #: 203-945-1770

Email address: Support@sunflowerlearningcenter.org License #: 70528 Expiration Date: 11-30-27

Capacity: 54 # of Children Present: 0 # of Staff Present: 2

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: Consent order monitor

Observations/Corrections needed:
Observed no children present, program not currently operating during this inspection

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

Providers/providers are required by regulations and statutes to maintain compliance at all times.

Corrective Plan SHALL BE RETURNED TO _____

Signature: Jen Schultz Johanneke Dato
(OEC Representative)
Signature: Shanelle Wilson
(Person in Charge)
Shanelle Wilson