

2024-1079

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bright Path - Windsor Date: 2/27/24 Time: 10am

Location Address: 555 Day Hill Rd Windsor, CT Telephone #: 860-580-5280

e-mail address: Cmozzicato@brightpathkids.com License #: 16517 Expiration Date: 1/31/26

Capacity: 184/109 # of Children Present: 71 # of Staff Present: 18

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: 3 month Partice

Observations/Corrections needed:

PIC Christina Mozzicato - Director

(NS) 19a-179-3a(d)4(c) - Staffing and Consultant - 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.

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

Signature: [Signature]
(OEC Representative)
Print Name: Valeca Wilton
Signature: [Signature]
(Person in Charge)
Print Name: Christina Mozzicato