

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: Edgewood Academy Date: 4.15.25 Time: 9:37  
Location Address: 18 Edgewood Ave Stamford Telephone #: 203 921 6304  
e-mail address: info@edgewoodacademy.net License #: 70061 Expiration Date: 6-30-28  
Capacity: 28/28 # of Children Present: 24 # of Staff Present: 7

**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 4.11.25 inspection (group size)

Observations/Corrections needed:

119(c)(3) - ~~group size~~ - group size - OK at inspection  
jm

120(c)(4) - physical barriers - OK at 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: [Signature]  
(OEC Representative)

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

Signature: Shabenne Becker  
(Person in Charge)