

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Connecticut Friends School Date: 5/17/25 Time: 12:30

Location Address: 317 New Canaan Rd. Telephone #: 203-762-9110
Wilton, CT

e-mail address: _____ License #: 70349 Expiration Date: 2/28/29

Capacity: 58/8 # of Children Present: 26/3 # of Staff Present: 5

**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: follow up on fence height

Observations/Corrections needed:

19a-79-7a (h)(1)(A) - observed fence height less than 4 feet.

Additional violation

19a-79-10 (c)(3) - observed 3 two year olds combined with a classroom of 8 preschoolers leaving the group size at 11.

19a-79-10 (d)+(e)+(h) - observed 3 toddlers in a preschool classroom without the necessary age appropriate equipment.

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: 5/21/25

Signature: [Signature]
(OEC Representative)

Print Name: Erin Moran

Signature: [Signature]
(Person in Charge)

Print Name: Leighanne Lewis