

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

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Naugatuck YMCA Preschool and Early Learning Center Date: 12-11-25 Time: 11:50am
Location Address: 284 Church St. Telephone #: 203-729-9622
e-mail address: rpaul@naugatuckymca.org License #: 12283 Expiration Date: 2-28-29
Capacity: 70 # of Children Present: 44/29u3 # of Staff Present: 11

Consent to Inspect Family Child Care Home	<i>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.</i> <i>Provider/Applicant/Substitute's Signature</i> <u>n/a</u>
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Purpose of visit: follow up to 12-1-25 inspection

Observations/Corrections needed:

118 10(c)(2) Ratio: ✓OK

119 10(c)(3) Group Size: ✓OK

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: Betty Mayer

(OEC Representative)
Print Name: Betty Mayer

Signature: [Signature]
(Person in Charge)

Print Name: Dena Guerville