

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: New Beginnings Early Learning Center Date: 2/26/2018 Time: 3:25 PM
Location Address: 211 Laurel Street Hartford Telephone #: 860-263-8727
e-mail address: hartfordelc@newbeginningsct.org License #: 70220 Expiration Date: 1/31/27
Capacity: 87/49 # of Children Present: 17 # of Staff Present: 8

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. Provider/Applicant/Substitute's Signature</i>
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Purpose of visit: Follow up visit

Observations/Corrections needed:

DEC representative conducted walk-through and discussed nature of case; reason for substantiation and process to dispute violation. DEC delivered copy of video footage previously obtained.

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: w/a

Signature: [Signature]
(OEC Representative)
Print Name: Evelyn Vicente-Quinones
Signature: [Signature]
(Person in Charge)
Print Name: Rebecca Mulrooney