



DIVISION OF LICENSING

450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103
 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552
 Email: oc.licensing@ct.gov Website: www.ctoec.org

CHILD CARE CENTER/GROUP CHILD CARE HOME INVESTIGATION

Program Name	EDADVANCE BASES HAWLEY ELEMENTARY					License Number	DCCC.15034		Date of Inspection	04/15/2026	
						Expiration Date	3/31/2030		Time of Inspection	03:17 PM	
Address	29 CHURCH HILL RD NEWTOWN CT 06470-1612					Telephone	(203) 482-0330		Licensed Capacity	37	
						Hours of Operation	7:30 AM – 6:00 PM		Under Three Capacity	0	
Is this a Change of Address?		Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	5 years – 12 years	
New Address						Night Hours	No	Summer Hours	Closed	Weekend Hours	No
						Program's Email	viscariello@edadvance.org				
Operator	EDADVANCE					Director	Sarah Moran				
Endorsements	School Age					Name of Inspector	Kristi Morgan				
Numbers of Staff/Children Present	# Children Present under age 3	0	# Total Children Present	0	# of Staff Present	3	Purpose of Visit	Investigation case 2026-264			

SUBSTANTIATED VIOLATIONS

Statute and/or Regulation and Description:

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Statute and/or Regulation and Description:	
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Statute and/or Regulation and Description:	
Statute and/or Regulation and Description:	
Statute and/or Regulation and Description:	
NOT SUBSTANTIATED or PENDING	
Statute and/or Regulation and Description:	[19a-79-3a(b)(7)(A)] Pending
006-Child behavior management	
Child behavior management compliance is pending further investigation	
Statute and/or Regulation and Description:	[19a-79-3a(d)(2)-(7)] Pending
011-Policies- complete, implemented	
Policy compliance is pending further investigation.	

Statute and/or Regulation and Description:		[19a-79-5a(a)(3)(A)] Pending		041- Injury, Illness, Incident, Accident reports	
Injury, illness, incident, accident reports compliance is pending further investigation					
Statute and/or Regulation and Description:					
Statute and/or Regulation and Description:					
Statute and/or Regulation and Description:					
Statute and/or Regulation and Description:					
DISCUSSIONS/COMMENTS					
Were Violations cited during this visit? Y or N?		No	NOTE: * It is the operator's responsibility to ensure compliance with all local codes and ordinances.		
Signature of OEC Representative					Signature of Person in Charge
Printed Name	Kristi Morgan		Sarah Moran		Printed Name
2nd OEC Representative			APPLICANTS: You <u>MAY NOT OPERATE</u> until all requirements have been met <u>and</u> a license has been issued by the Agency.		
Printed Name			THIS INSPECTION SHALL BE POSTED OR SHALL BE AVAILABLE FOR REVIEW UPON REQUEST.		
		Written Corrective Action Plan due by:		DIVISION OF LICENSING 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552 Email: oc.licensing@ct.gov Website: www.ctoec.org	
OEC Representative's Email:		kristi.morgan@ct.gov		CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf	