

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: First Path Academy Date: 5/11/20 Time: 9:30 AM
Location Address: 45 Long Hill Rd Windsor Telephone #: 800 202 2819
e-mail address: firstpathacademy25@gmail.com License #: 8042 Expiration Date: 10/31/29
Capacity: 12/4 # of Children Present: 0^{OFFIC} 8/2 # of Staff Present: 3

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: partial for fence in outdoor play area

Observations/Corrections needed:

#112-^(EXE) Observed fence in ~~disrepair~~ ^(OK) disrepair. fence is not sturdy and partially falling over. wood is chipping on fence, splinter hazards for children

Discussed - To add a playground structure - to follow manufacturer guidelines for use, installation, etc. If children use under 3, fence needs to be installed

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: Ma Kellen
(OEC Representative)

Print Name: Kellen

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 5/25/20

Signature: Jessica Salvador
(Person in Charge)

Print Name: Jessica Salvador