



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 FOLLOW UP – PARTIAL INSPECTION

Program Name	NORTH STONINGTON CHRISTIAN ACADEMY					License Number	DCCC.14266		Date of Inspection	06/04/2026	
						Expiration Date	5/31/2029		Time of Inspection	08:30 AM	
Address	12 STILLMAN RD NORTH STONINGTON CT 06359-1733					Telephone	(860) 599-5071		Licensed Capacity	19	
						Hours of Operation	7:30 AM – 5:00 PM		Under Three Capacity	0	
Is this a Change of Address?		Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	3 – 10 years	
New Address						Night Hours	No	Summer Hours	Closed	Weekend Hours	No
						Program's Email	nscapbw@sbcglobal.net				
Operator	SECOND BAPTIST CHURCH					Director	PAMELA B WILKINSON				
Endorsements	Pre-School, School Age					Name of Inspector	Bridget Merrill				
Numbers of Staff/Children Present	# Children Present under age 3	0	# Total Children Present	3	# of Staff Present	2	Purpose of Visit	Follow up for 2 staff present			

REGULATIONS NOT IN COMPLIANCE

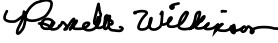
Statute and/or Regulation and Description:	[-] 000 No Violations
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No violations were cited during this inspection

Statute and/or Regulation and Description:	
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Statute and/or Regulation and Description:	
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REGULATIONS IN COMPLIANCE	
Statute and/or Regulation and Description:	[19a-79-4a(d)(2)] 025- Two staff present - age 18 or older
The regulation regarding two staff present was found to be in compliance during this visit.	
Statute and/or Regulation and Description:	

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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	Bridget Merrill	Pamela Wilkinson	Printed Name
2 nd OEC Representative	APPLICANTS: You <i>MAY NOT OPERATE</i> 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: bridget.merrill@ct.gov		CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf	