



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District II Date 3-28-22

Name Pontotoc Head Start License No. 5806

Address 341 Ridge Dr. Pontotoc MS. 38663
Center/Organization/Individual

Purpose PCC - Follow up Director Mary Beth Benjamin

Mileage Start _____ Mileage End _____

County Pontotoc Telephone No. 662-509-7085

Time In _____ Time Out _____ Total Time _____

Findings/Comments PCC On Electronic inspection dated 02-18-22
requested the facility to submit the following:
MSD# 121 forms for 10 children
Fire form 333
menus
renewal, application and payment
remove broken swing
The following were rec'd, reviewed and approved

Center Director/Designee/Individual

Child Care Representative

 White Copy - Facility File
 Yellow Copy - Operator