

MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District

II

Date _____

S-15-20

Name _____

Northside Head Start

License No. _____

5811

Address

517 Linden Hill St. Tupelo, MS

Center/Organization/Individual

Purpose

Follow up / poc

Director

Deidrah Bean

Mileage Start

Mileage End

County

Lee

Telephone No. _____

662-844-7523

Time In

Time Out

Total Time

Findings/Comments

Lo rec'd fire form #333, menus, and news.

Center Director/Designee/Individual

Child Care Representative

White Copy - Facility File
Yellow Copy - Operator

Mississippi State Department of Health

Revised 6-24-09

Form No. 287