Mississippi State Department of Health

Child Care Encounter

District 1

Date 10-28-21

Name Walls Head Start Center License No. 2557

Address 6479 third St Walls MS 38680
Center/Organization/Individual

Purpose Ins Follow up Director Cynthia Dennis

Mileage Start ___ Mileage End ___

County DeSoto Telephone No. 662-781-2030

Time In ___ Time Out ___ Total Time ___

Findings/Comments

Received fin form + Menu.

Facility has paid renewal fee and completed renewal application.

All documents have been received to renew license.

RR Email
Center Director/Designee/Individual

Child Care Representative

White Copy - Facility File
Yellow Copy - Operator