

Child Care Encounter

Child Care Encounter	11-01-
District	Date 6 29 20
Name Croative Learning Conter License No. 53 CEF	7-6830
Address 100 E. Lamblin Street Starkvilles 1	NS 39459
	Icen
Mileage Start Mileage End	
0111-10-10	3-0111
	o Citi
Time In Total Time	Ass -
assuring review of records and building com	y operator
up-to-clase and that the tacility is free of	huzaros.
W. Carlotte and the state of th	
	W. W. C E E
Center Director/Designee/Individual Child Care Representative	White Copy - Facility File Yellow Copy - Operator

Please sign the acknowledgment below and send back to your licensing official.

This letter is an acknowledgment from the Mississippi State Health Child Care Licensure
Division to the person(s) who will be held responsible for any violations that may be found while
conducting any type of inspection.

I, Velisha Lacey (name), serve in the capacity of owner, director, or director designee of <u>Creative</u> (center name). I acknowledge that I was instructed to review my records and building to assure that all documents are up-to-date and that the facility is free of hazards.

I realize that by signing this document that I am agreeing that all required documents that are needed for a temporary, mid-year, and renewal inspection for a license are in place at this time.

Director Signature

Date of Signature