



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District 5

Date 06.01.2021

Name _____ License No. #0006

Address _____

Purpose Re-measurement / TA Center/Organization/Individual Michelle White Director

Mileage Start Hinds Mileage End _____

County Hinds Telephone No. _____

Time In 9:11 a.m. Time Out 10:25 a.m. Total Time _____

Findings/Comments Upon arrival the LO(S) met with the director Michelle White.

The purpose of this visit is to conduct a re-measurement and to provide technical assistance w/facility.

Facility Capacity is 149.

LO(S) left a green survey card w/director - Michelle White.

Michelle White
Center Director/Designee/Individual

Azelda Ellis
Child Care Representative
Theresa Hillman

White Copy - Facility File
Yellow Copy - Operator