



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District I Date 9-22-20

Name Oak Grove Central Elem License No. 3909

Address 893 W Oak Grove Rd Hernando, MS 38632
Center/Organization/Individual

Purpose DOC Follow-Up Director Nichole Derrick

Mileage Start _____ Mileage End _____

County Desoto Telephone No. 662-562-2071

Time In _____ Time Out _____ Total Time _____

Findings/Comments DOC on Child Care Encounter dated 8-27-20
required facility to submit documentation of valid Fire Form 333,
contact hours, Acknowledgement form, and menu.
Requested documents rec'd 9-22-20

Received the following:
Fire Form 333
Contact hours
Acknowledgement form
menu

Center Director/Designee/Individual

Nichole Derrick
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator