

Program Inspection Before & After School Center Compliance Plan

Provider's Name: **GAP-Methodist**

City: **Brookings**

Provider Number: **011508869**

Inspector: **Ambuer Jaacks**

Date of Inspection: **08/13/2020**

Time of Inspection: **10:46 AM**

Provider was found to be in full compliance

Kristi League

Provider Signature

08/20/2020

Date

Ambuer Jaacks

Inspector Signature

08/20/2020

Date