

# Program Inspection Before & After School Center Compliance Plan

Provider's Name: **Kidscope- Jefferson  
Elementary**

City: **Watertown**

Provider Number: **011513612**

Inspector: **Rachel Holm**

Date of Inspection: **02/04/2019**

Time of Inspection: **1:39 PM**

**Provider was found to be in full compliance**

**Monica LaFave**

Provider Signature

**02/06/2019**

Date

**Rachel Holm**

Inspector Signature

**02/06/2019**

Date