

Facility					
Name: Children's Choice		L	icense Number: 135439		
Address: 8901 Lowell D	r. NE, Albuquerque, NN	187122			
Phone: 5054801298 Fax:		E-mail: mon	E-mail: moniquecarrillo977@gmail.com		
License Information					
Type : 5 Star FOCUS Child Care Center	d Status: Licensed	Issue Date:		xpiration Date: 0/04/2018	
Capacity					
Over Age 2: <i>112</i> Square Footage: <i>0</i>	Under Age 2:0	Night Care:	0 Р	layground: 112	
Census					
Over 2: 65	Under 2 : 0				
Classrooms					
Number of Classrooms	:: 1				
Days and Hours of Operat	tion - Morning				
Monday 2:00 PM - 6:00 AM	Tuesday 2:00 PM - 6:00 PM	Wednesday 2:00 PM - 6:00 PM	Thursday 2:00 PM - 6:00	Friday PM 2:00 PM - 6:00 PM	
Saturday Closed	Sunday Closed				
Days and Hours of Operat	tion - Afternoon				
Monday 2:00 PM - 6:00 PM	Tuesday 2:00 PM - 6:00 PM	Wednesday 2:00 PM - 6:00 PM	Thursday 2:00 PM - 6:00	Friday PM 2:00 PM - 6:00 PM	
Saturday Closed	Sunday Closed				
Inspection					
Date: 05/09/2018	Time In: 1:50 PM	Time Out: 2	:45 PM P	urpose: Annual	
Licensure					
8.16.2.40 A Licensing R	equirements			Not Inspected	
8.16.2.40 B Capacity of a Program				Compliance	
8.16.2.40 C,D Incident Reporting Requirements Not Inspect					
Administrative Require	ments				
8.16.2.41 A Administrat	ive Records			Compliance	

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Compliance Compliance

Compliance

Compliance

Buildings, Grounds & Safety (continued)

8.16.2.47 F Toilet and Bathing Facilities:

8.16.2.47 G Safety Compliance:

8.16.2.47 H Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances

8.16.2.47 I Pets

Additional Comments

None

Signatures

Please Note: Per CYFD regulation NMAC 8.16.2, failure to comply with the corrective action plans noted above, may result in further action taken against the licensee.

Surveyor: Patricia Williams

Facility Representative: Leann Sommers Savana George