

Facility				
Name: Noahs Ark Learn	License Number: 12988			
Address: 5605 Bataan l			•	
Phone: 5755240827	Fax:	E-mail: candy@lascrucesf	irst.org	
License Information				
Type: 2 Star Child Care Center	Status: Licensed	Issue Date: 05/27/2018	Expiration Date: 05/26/2019	
Capacity				
Over Age 2: 165 Square Footage: 0	Under Age 2:0	Night Care: 0	Playground: 77	
Census				
Over 2:83	Under 2:0			
Classrooms				
Number of Classrooms	s: 8			
Days and Hours of Opera	tion			
Monday 6:30 AM - 6:00 PM	Tuesday 6:30 AM - 6:00 PM	Wednesday Thursday 6:30 AM - 6:00 PM 6:30 AM - 6:00 PM		
Saturday Closed	Sunday Closed			
Inspection				
Date: 02/01/2019	Time In: 2:57 PM	Time Out: 3:40 PM	Purpose: Other	
Licensure				
8.16.2.11 A Types of Li	censes		N/A	
8.16.2.11 B Renewal of	License		N/A	
8.16.2.11 D Non-transf	8.16.2.11 D Non-transferable Restrictions of License			
8.16.2.12 A, K, M Licen	sing Actions and Adr	ninistrative Appeals	N/A	
8.16.2.17 E, F Surveys	for Child Care Faciliti	es	N/A	
8.16.2.18 D Complaints				
8.16.2.21 A Licensing Requirements				
8.16.2.21 B Capacity of	-		N/A 	
0.10.2.21 D Capacity OI	Centers		IN/A	

Licensure (continued)	
8.16.2.21 C Incident Reporting Requirements	N/A
Administrative Requirements	
8.16.2.22 A Administrative Records	N/A
8.16.2.22 B Mission, Philosophy and Curriculum Statement	N/A
8.16.2.22 C Policy and Procedures	N/A
8.16.2.22 D Family Handbook	N/A
8.16.2.22 E Children's Records	Compliance
8.16.2.22 F Personnel Records	N/A
8.16.2.22 G Personnel Handbook	N/A
Personnel & Staffing	
8.16.2.23 A Personnel and Staffing Requirements	Compliance
8.16.2.23 B Staff Qualifications and Training	Compliance
8.16.2.23 C Staff/Child Ratios and Group Sizes	N/A
Services & Care of Children	
8.16.2.24 A Guidance	N/A
8.16.2.24 B Naps or Rest Period	N/A
8.16.2.24 C Additional Requirements for Infants and Toddlers	N/A
8.16.2.24 D Diapering and Toileting	N/A
8.16.2.24 E Additional Requirements for Children with Special Needs	N/A
8.16.2.24 F Additional Requirements for Night Care	N/A
8.16.2.24 G Physical Environment	N/A
8.16.2.24 H Social-Emotional Responsive Environment	N/A
8.16.2.24 I Equipment and Program	N/A
8.16.2.24 J Outdoor Play Areas	N/A
8.16.2.24 K Swimming, Wading and Water	N/A
8.16.2.24 L Field Trips	N/A

N/A
N/A
N/A
N/A
N/A
N/A
N/A
N/A
Compliance
N/A
N/A
N/A
N/A N/A
N/A N/A N/A
N/A N/A N/A N/A
N/A N/A N/A N/A N/A

Survey is in reference to the Conditions or Operation for the month of January. All conditions are being met.

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.

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Surveyor: Crystal Patton

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Facility Representative: Marie Aguirre