

**Facility Safety Inspection
Fire & Life Safety / Environmental Health
Licensed Day Care Programs
Compliance Plan**

Provider's Name: **St. Michael School**

City: **Sioux Falls**

Provider Number: **018041884**

Inspector: **Dwight Johnson**

Date of Inspection: **05/13/2019**

Time of Inspection: **3:59 PM**

Provider was found to be in full compliance

Audrey Thompson

Provider Signature

05/13/2019

Date

Dwight Johnson

Inspector Signature

05/13/2019

Date