

Government of Gouvernment des
Northwest Territories Territoires du Nord-Ouest

Child Day Care Licensing Inspection Summary

Licence Number: ______

This information is being collected under the authority of the *Child Day Care Act* and *Regulations* and will be used in the Licensing Inspection System. The personal information is protected under the *Access to Information and Protection of Privacy Act*. If you have any questions about the collection, contact the Director of Early Childhood Development and Learning at 867-920-3491.

Date of Inspection: November 16, 2017 Name of Facility: Paulatuk Aboriginal Head Start

	Non-Compliance	Child Day	High	Med	Low	Corrective Action Required	Required	For GNWT
		Care Reg #	Risk	Risk	Risk	X	Compliance	Use Only
							Date	Date
							*	Corrected
,	Application for	11(2)(1)		/		Parental signature on lapplication	~ Nov 30'17	Nov 28/17
	Enrolment for					2 applications require immunization		
	each child					record		_
		\.				2 applications require health card#		4
_	Proof of	46(1)		/		provide proof of updated	Nov. 30 17	Nov 28'17
	1 mmunization					immunizations as per the NWT		
	for Staff		4		-	Immunization schedule		
		-8	-	9				

I confirm that the Early Childhood Consultant has explained the above non-compliances, the corrective action required and the consequences for failing to meet requirements.

Signature of child day care facility operator: _	Irens Riben	$0.1 \circ$	Date: November 16/17
Signature of Early Childhood Consultant:		Mugh	Date: November 16 2017

This licensing summary must be clearly posted where parents can see it. This document will be available on-line at www.ece.gov.nt.ca within 10 days of inspection.

Page _____ of ____