



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF
LIFELONG EDUCATION, ADVANCEMENT, AND POTENTIAL
LANSING

Michelle Richard
ACTING DIRECTOR

Report Type : Addendum to Original Report
Inspection Type: Modification

Date of Inspection: 03/05/2024
Date of Report: 3/11/2024

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| Licensee Name(s) | License Number |
| Lake Superior Academy | DC170381621 |
| Capacity | Facility Name |
| 82 | Lake Superior Academy |
| Program Type | Licensee Designee(s) |
| Center | Susie Hoath Schlehuber |
| Central Administrator(s) | Program Director(s) Name |
| | Kristina Lynn Nichols Qualifications: R 400.8113(7)(d) (12). Date PD Approved: 4/29/2022 |
| Facility Address | Mailing Address |
| 8936 S Mackinac Trail, Sault Ste Marie, MI, 49783 | PO Box 46, Dafter, MI, 49724 |
| Facility Phone Number | Facility Email Address |
| 9062591168 | susieschlehuber@choiceschools.com |

Findings of the Inspection

Purpose of Addendum: Increase center capacity

Findings and Conclusions: I recommend that this facility be approved for 82 school age children.

If you have questions regarding the report, please contact licensing consultant, Cheree Riley at (989) 619-1651 or riley3@michigan.gov. In the event that Cheree Riley is not available and you need to speak to someone immediately, please contact the Child Care Licensing Bureau at 517-284-9730.

| Description of Facility |
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| This facility is the Lake Superior Academy, a Montessori elementary school through 3rd grade. It is located south of Sault Ste. Marie on rural Mackinac Trail Road. There are five approved classrooms. |

Approved Child Use Space

The licensee/ licensee designee understands that the ratio of child care staff member to children and the maximum group size is determined by the youngest child in the room. Equipment in the room must be appropriate for the ages of the children in the room.

| Building/Wing | Room | Notes (location, well-defined space, etc.) | Lead Hazard Found |
|-----------------------------|-------------|---|---|
| | Erie Room | | N/A |
| Age Range : Capacity | | Square Footage | Space Used to Calculate Capacity |
| 5 years - 12 years : 25 | | 900 | Yes |

| Building/Wing | Room | Notes (location, well-defined space, etc.) | Lead Hazard Found |
|-----------------------------|-----------------------------|---|---|
| | Original Building classroom | | N/A |
| Age Range : Capacity | | Square Footage | Space Used to Calculate Capacity |
| 5 to 12 years : 23 | | 838 square feet | Yes |

| Building/Wing | Room | Notes (location, well-defined space, etc.) | Lead Hazard Found |
|-----------------------------|---------------|---|---|
| | New Classroom | | N/A |
| Age Range : Capacity | | Square Footage | Space Used to Calculate Capacity |
| 5 - 12 years : 25 | | 870 square feet | Yes |

| Building/Wing | Room | Notes (location, well-defined space, etc.) | Lead Hazard Found |
|-----------------------------|-------------------------------|---|---|
| | Original Building eating area | | N/A |
| Age Range : Capacity | | Square Footage | Space Used to Calculate Capacity |
| 5 - 12 years : 7 | | 256 square feet | Yes |

| Building/Wing | Room | Notes (location, well-defined space, etc.) | Lead Hazard Found |
|-----------------------------|-------------|---|---|
| | Huron Room | | N/A |
| Age Range : Capacity | | Square Footage | Space Used to Calculate Capacity |
| 5 years - 12 years : 25 | | 900 | Yes |

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| Description of Outdoor Play Area | | | |
|----------------------------------|----------------------|-----------------|--|
| Location | Enclosed Space | Outdoor Hazards | Playground Inspection |
| | Fully fenced in area | none | The children will use Montessori materials, natural materials, and conduct gardening activities. |

| Number of Sinks and Toilets | | | |
|-----------------------------|------------------------|--------------|--------------|
| Location | # of Handwashing Sinks | # of Toilets | # of Urinals |
| | 9 | 6 | |

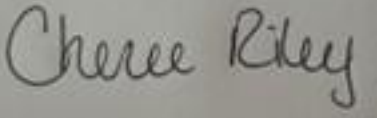
| Hours of Operation | | | | | | |
|---------------------------|---------------------------|---------------------------|---------------------------|---------------------------|----------|--------|
| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| 08:00 AM To 5:30 PM | 08:00 AM To 5:30 PM | 08:00 AM To 5:30 PM | 08:00 AM To 5:30 PM | 08:00 AM To 5:30 PM | | |

| Terms, Program Components, and Variances | | | | | | | |
|--|---------------------|------------------|-----------------|------------------------------------|----------------|--------------|-----------------|
| Full Time or Part Time Care | Months of Operation | Care Before 6 AM | Care After 6 PM | Before School or After School Care | Overnight Care | Weekend Care | Head Start/GSRP |
| Both Full and Part Time | Year Round | No | No | Before/After School | No | No | No |
| Food Service | No | | | | | | |
| Transportation | No | | | | | | |
| Swimming | No | | | | | | |
| Variances | No | | | | | | |

| Recommendation |
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I recommend that this facility be approved for 82 school age children.

Approved By:

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|---|-------------------|
|  | 03/11/2024 |
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| Cheree Riley | |
| Licensing Consultant | Date |