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Inspection Report

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| Provider Name: Laugh-N-Learn, Inc. | Provider Information | License No: L357950 |
| Provider Address: 620 South Lincoln Blvd., Hodgenville, KY, 42748 | Provider Type: LICENSED TYPE I | Capacity: 108 |
| Owner(s): LAUGH-N-LEARN, INC. | | Director(s): Becker, Michelle Lynette |

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| Inspection Type: Investigation | Inspection Information | Inspection No: 128345 |
| Visit Start Date: 12/01/2014 11:28 AM | Visit End Date: 12/01/2014 12:04 PM | |
| | No. of Children Present: 40 | |

Inspection Report

Supervision

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| 5 - Children Supervised | In Compliance |
| <p>922 KAR 2:120. Section 2. Child Care Services. (3)(a) Each center shall maintain a child-care program that assures each child will be: 1. Provided with adequate supervision at all times by a qualified staff person who: a. Ensures the child is within scope of vision and range of voice; or b. For a school-age child, within scope of vision or range of voice;</p> | |

Staffing Requirements

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| 40 - Ratios and Group Size | In Compliance |
| <p>922 KAR 2:120. Section 2. Child Care Services. (2) Minimum staff-to-child ratios and group size for an operating child-care center shall be maintained as follows: Age of Children Ratio Maximum Group Size* Infant 1 staff for 5 children 10 Toddler 1 staff for 6 children 12 Preschool-age 2 to 3 years 1 staff for 10 children 20 Preschool-age 3 to 4 years 1 staff for 12 children 24 Preschool-age 4 to 5 years 1 staff for 14 children 28 School-age 5 to 7 years 1 staff for 15 children 30 School-age 7 and older 1 staff for 25 children (for before and after school) 30 1 staff for 20 children (full day of care) 30 *Maximum Group Size shall be applicable only to Type I child-care centers.</p> | |

Director Requirements

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| 265 - Health, Safety, Comfort | In Compliance |
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Inspection Report

922 KAR 2:110. Section 4. Director Requirements and Responsibilities.

- (1) Effective with the adoption of this administrative regulation, a director shall:**
(l) Provide for the health, safety, and comfort of each child;

Signature of
Provider/Representative

Title

Date