

# Program Inspection Compliance Plan

Provider's Name: **Kidstop - Wilson**

City: **Rapid City**

Provider Number: **016536521**

Inspector: **Tina Uecker**

Date of Inspection: **01/22/2024**

Time of Inspection: **4:00 PM**

**Provider was found to be in full compliance**

**Alisa Cunningham**

Provider Signature

**02/08/2024**

Date

**Tina Uecker**

Inspector Signature

**02/08/2024**

Date