

Facility Safety Fire & Life Safety / Environmental Health Compliance Plan

Provider's Name: **Sioux Falls Christian School**

City: **Sioux Falls**

Provider Number: **018042354**

Inspector: **Sarah Boese**

Date of Inspection: **11/16/2023**

Time of Inspection: **2:31 PM**

Provider was found to be in full compliance

Deanna Smith

Provider Signature

11/16/2023

Date

Sarah Boese

Inspector Signature

11/16/2023

Date