Facility Safety Fire & Life Safety / Environmental Health Compliance Plan

Provider's Name:	**St. Katharine Drexel School**	City:	**Sioux Falls**	Provider Number:	**018042355**
Inspector:	**Todd Lowe**	Date of Inspection:	**11/13/2024**	Time of Inspection:	**4:23 PM**

Provider was found to be in full compliance

Haley Lutz	**11/13/2024**	**Todd Lowe**	**11/13/2024**
Provider Signature	Date	Inspector Signature	Date