

Program Inspection Compliance Plan

Provider's Name: **School of Early Education -
Brandon**

City: **Brandon**

Provider Number: **018043091**

Inspector: **Brooke Flemmer**

Date of Inspection: **05/30/2024**

Time of Inspection: **9:42 AM**

Provider was found to be in full compliance

Heather Groos

Provider Signature

05/30/2024

Date

Brooke Flemmer

Inspector Signature

05/30/2024

Date