Ofsted Registration Number: EY431739

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**Toilet Checklist:**

**Cleaned & Sanitised:**

**Morning session**

|  |  |  |  |
| --- | --- | --- | --- |
| **Areas to be cleaned**  **& sanitised** | **Times** | **Date** | **Name** |
| Door handles |  |  |  |
| Toilets & seats |  |  |  |
| Toilet handles |  |  |  |
| Sinks |  |  |  |
| All surfaces |  |  |  |
| Steps |  |  |  |
| Potties |  |  |  |
| Changing mats |  |  |  |
| Hand drier /wall |  |  |  |

**Afternoon session**

|  |  |  |  |
| --- | --- | --- | --- |
| **Areas to be cleaned**  **& sanitised** | **Times** | **Date** | **Name** |
| Door handles |  |  |  |
| Toilets & seats |  |  |  |
| Toilet handles |  |  |  |
| Sinks |  |  |  |
| All surfaces |  |  |  |
| Steps |  |  |  |
| Potties |  |  |  |
| Changing mats |  |  |  |
| Hand drier /wall |  |  |  |