STATE OF MICHIGAN
DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING

JENNIFER M. GRANHOLM
GOVERNOR

ISMAEL AHMED
DIRECTOR

September 11, 2008

Erin Knieper
City of Livonia
15100 Hubbard
Livonia, MI 48154

RE: License #: CD820296593 and
SD820296531
Camp Swoosh
15100 Hubbard
Livonia, MI 48154

Dear Ms. Knieper :

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility.

Please review the enclosed documentation for accuracy and feel free to contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact Janice Tribble, Program Manager, at (517) 335-6068.

Sincerely,

Darrell Clay

Darrell D. Clay, Licensing Consultant
Bureau of Children and Adult Licensing
322 E. Stockbridge Ave
Kalamazoo, MI 49001
(269) 337-5037

enclosure

MICHIGAN DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING
ADDENDUM TO ORIGINAL LICENSING STUDY REPORT

I. IDENTIFYING INFORMATION

License #:	CD820296593
Licensee Name:	City of Livonia
Licensee Address:	15100 Hubbard Livonia, MI 48154
Licensee Telephone #:	(734) 466-2410
Administrator/Licensee Designee:	Erin Knieper, Designee
Name of Facility:	Camp Swoosh
Facility Address:	15100 Hubbard Livonia, MI 48154
Facility Telephone #:	(734) 466-2900
Capacity:	40
Program Type:	CHILD CAMP - DAY

II. Purpose of Addendum

Onsite review to assess compliance with rules and to evaluate adherence to submitted policies.

III. Methodology

Onsite visit 7/24/2008

IV. Description of Findings and Conclusions

No violations

V. Recommendation

Continue current status



Darrell D. Clay
Licensing Consultant

Date September 11, 2008