

Date Correction Plan Due 9/5/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 262-446-7800
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Use of Form: This form is used by certification / licensing staff to identify statute and / or administrative rule violation(s) and to outline imposed plans of correction, if applicable. This form is used by certified operators / licensed centers to meet the requirements of DCF 202.065, DCF 250.04(2)(i) and (3)(d), DCF 251.04(2)(L) and (3)(f), DCF 252.41(1)(L) and (2)(k). Failure to submit an appropriate correction plan by the due date listed above may result in sanctions identified in the statute and / or administrative rule. Public Schools may submit plans of correction however are not required to do so.

Instructions: The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. Complete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each of the listed noncompliance(s). Identify expected completion date(s) for each item. Return the original to your certification / licensing specialist for approval and retain a copy. If this is a licensed child care, post your copy of the noncompliance statement and correction plan near the license in accordance with Wis. Stat. 48.657. This request for a correction plan is not an order imposing a sanction or penalty pursuant to Wis. Stat. 48.715. If the department decides to apply a statutory sanction and / or penalty for facts arising from this finding or a future finding, you will be given a notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center Tubbie's Christian Day Care		Provider Number / Facility ID Number 4000568534 / 001 - 1002188		
Address - Facility (Street, City, State, Zip Code) 4314 N 63Rd St Milwaukee WI 53216		Telephone Number 414-536-7456	Date - Regulation Visit 8/18/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)1. Child Record - Enrollment Information Description: Child 2 had incomplete parent and authorized persons information available during the monitoring visit.	Parent completed the the incomplete parent & authorized person information already!	8-22-25	
2	250.05(4)(c)4. Continuing Education - Documentation Of 12 Month Period Description: Staff A did not have 15 hours of continuing education from 2024 available for review at the time of the monitoring visit.	The steps taken for my continuing education is ive already signed up for child abuse & neglect; will sign up for other inservices including CPR etc. to complete my 15 hours for the year!	12-31-25	

NAME - Agency Worker
Mindi Sabljak, Rhonda Brueggemann

Date Issued
8/21/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

Shyllis Hanson-Morntau

8-26-25