

Date Correction Plan Due 6/29/2026	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		Provider Number / Facility ID Number	
Callier's Child Care Center		8000572408 / 001 - 1004986	
Address - Facility (Street, City, State, Zip Code) 4724 N 84Th St Milwaukee WI 53225		Telephone Number 414-616-3306	Date - Regulation Visit 6/15/2026
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	250.04(6)(a)1.b. Child Record - Enrollment Information - Parent's Names Description: Documentation of the full name's of the child's parents was not observed for Child 3.	Dad Name Added to Form	6/16/26
2	250.04(6)(a)1m.f. Child Record - Health History - Medical Condition Symptoms Description: Documentation of triggers, signs or symptoms and steps to take when a child is diagnosed with a medical condition was not observed for Child 1, who was identified as having gastrointestinal issues.	Mom has NO medical Documentation	6/16/26

- Mums Personal
Observance
File Updated

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4724 N 84Th St Milwaukee WI 53225		414-616-3306	6/15/2026
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 250.05(2)(c) Staff File - Days, Hours Worked Description: Documentation of the actual hours a provider worked daily was not observed when the provider was signed out at 4 PM during the monitoring visit.	Provider Will Not Sign Out Until Day End.	6/15/26	
4 250.06(2)(c) Access To Materials Potentially Harmful To Children Description: Anti-bacterial wipes labeled "Keep out of reach of children," we on a file cabinet in an area accessible to children. Repeat violation: Previously cited on 7/24/2025	Removed	6/15/26	
5 250.06(2)(m) Premises - Condition & Repair Description: The premises was not maintained in a sanitary condition when there was unflushed urine and feces in the toilet during the monitoring visit.	Toilet Flushed during visit	6/15/26	
6 250.07(3)(e) Trampolines & Inflatable Bounce Surfaces Description: There was a saucer swing with trampoline surface in the outdoor play area and was accessible to children in care.	Removed	6/15/26	

Name - Certified Operator / Licensed Center

Callier's Child Care Center

Address - Facility (Street, City, State, Zip Code)
4724 N 84TH ST Milwaukee WI 53225

Provider Number / Facility ID Number
8000572408 / 001 - 1004988

Telephone Number
414-616-3300

Date - Regulation Visit
6/15/2026

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date

NAME - Agency Representative
Tasha Varnell, Director of Services

Date Issued
6/15/2026

SIGNATURE / Certified Operator or Director / Licensee of Daycare

Date Signed

[Handwritten Signature]

6/19/2026