

DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL
608-422-6765

Date Correction Plan Due
2/18/2026

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.

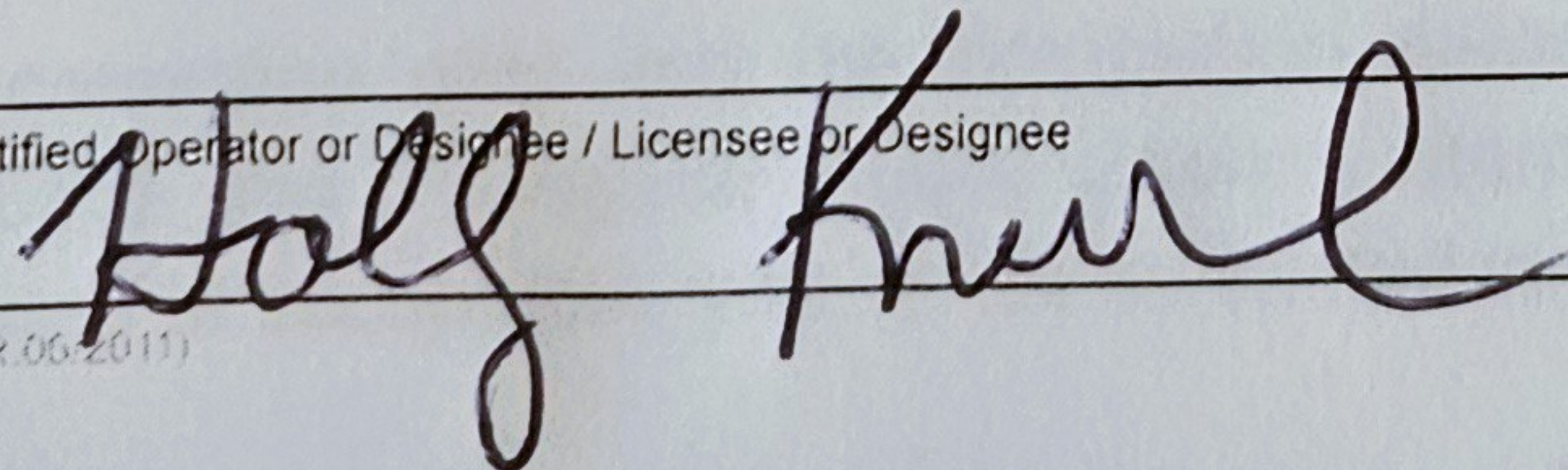
Instructions: The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. Complete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each 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	
K G E Family Child Care		2000585512 / 001 - 1015298	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
4901 Shore Acres Rd Monona WI 53716		608-535-0453	2/3/2026
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date
1	250.04(6)(b) Current, Accurate Daily Attendance Record Description: Daily attendance records were not current and accurate when one child was not signed in and another child was not signed out.	I will work harder to keep my attendance up to date	2-17-26
2	250.06(3)(b) Emergency Plans - Practice Description: Monthly fire drills were not practiced and recorded for Nov., Dec., or Jan. 2026.	I'll keep a note in my calendar so I don't forget to update my record	2-17-26

NAME - Agency Worker
Rebecca Brickson

Date Issued
2/4/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed

2-17-26