

Date Correction Plan Due 5/8/2026	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 608-422-6765
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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 Learning Links Child Care		Provider Number / Facility ID Number 8000588948 / 001 - 2003023		
Address - Facility (Street, City, State, Zip Code) 824 W Racine St Jefferson WI 535491053		Telephone Number 920-541-3319	Date - Regulation Visit 4/21/2026	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(3)(b) Report - Damage To Premises Description: Center did not report damages to premises within 24 hours.	The center will report any damages to the premises within the 24 hour required time frame prior to contacting insurance.	4/21/2026	
2	251.06(11)(b)7. Outdoor Play Space - Enclosure Description: The outdoor fence did not meet the minimum 4 feet of height required in all areas. Repeat violation: Previously cited on 4/28/2025	Modifications to fences will be made to meet the 4 feet height requirement. (waiting on insurance due to weather damage)	6/30/2026	

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3	251.07(6)(f)1.a. Medication Administration - Parent Authorization Description: Medications being stored at center did not have current parent authorization on file.	Medications stored in the office will be sent home.	4/21/26
			Verification Date

NAME - Agency Worker
Michelle Garcia, Jenny Capener

Date Issued
4/24/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Hayley Kuecker

Date Signed

5/7/2026