

<b>Date Correction Plan Due</b> 5/13/2026	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 920-785-7811
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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.

<b>Name - Certified Operator / Licensed Center</b> Little Owls Child Care Center Llc		<b>Provider Number / Facility ID Number</b> 8000590168 / 001 - 2005194		
<b>Address - Facility (Street, City, State, Zip Code)</b> 5934 S Business Dr Sheboygan WI 530818914		<b>Telephone Number</b> 920-912-8468	<b>Date - Regulation Visit</b> 4/28/2026	
	<b>Rule/Statute Number</b> <b>Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.06(4)(d) <b>Exits &amp; Passageways - Unobstructed, Minimum Width</b>  Description: Based on observations on 4/28/26, three doors leading outside with exit signs were locked.	<i>The 3 doors leading outside with exit signs will be unlocked during operating hours.</i>	<i>4/29/2026</i>	
2	251.07(6)(f)1.a. <b>Medication Administration - Parent Authorization</b>  Description: Based on record review on 4/28/26, medication authorization in the infant room did not have a start and end date.	<i>staff will make sure all medication authorization forms be filled out completely by parents.</i>	<i>4/30/2026</i>	

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3	251.09(1)(c) <b>Infant &amp; Toddler - Documenting Changes In Development</b>  Description: Based on record review on 4/28/26, child 1 and 3 did not have updated document changes in a child's development and routines every 3 months.	Staff updated child 1 and 3 intake forms with parent signature/initials. Staff is reminded to keep a log of when children's intake forms are needed to be updated every 3 months.	4/30/2026

**NAME** - Agency Worker  
Dao Xiong

Date Issued  
4/29/2026

**SIGNATURE** - Certified Operator or Designee / Licensee or Designee

Date Signed



05/05/2026