

**Compliance Statement**  
**Public School Operated Child Care Program**

TO FILE A COMPLAINT, CALL: (262) 446-7800
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**Use of Form** Completion of this form meets the requirements of ch. 48, Wis. Stats., and provides the public school operated child care program with a summary of the results of the monitoring visit.

**Instructions - Licensing specialist** When no violations are observed during a visit, check the sections and / or partial sections of the administrative code monitored. If you didn't monitor the entire section, you may also reference the specific subsections, paragraphs, or subdivisions completed.

Name - Facility Mps - Camp Lowell	Address - Facility (Street, City, State, Zip Code) 4360 S 20Th ST Milwaukee, WI 532212367	Telephone Number (414) 304-6644	Facility ID 2100208
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**NO ADMINISTRATIVE CODE VIOLATIONS WERE OBSERVED DURING THIS MONITORING VISIT.**

The following checked items indicate the sections and / or partial sections of the administrative code that were monitored on this visit.

<input checked="" type="checkbox"/>	<b>Operational requirements</b> Met all health and safety tag requirements	<input checked="" type="checkbox"/>	<b>Staff</b> Met all health and safety tag requirements
<input checked="" type="checkbox"/>	<b>Physical plant and equipment</b>	<input checked="" type="checkbox"/>	<b>Program</b>
<input checked="" type="checkbox"/>	<b>Transportation</b> NONE	<input checked="" type="checkbox"/>	<b>Infant and toddler care</b> NONE
<input type="checkbox"/>	<b>Care of School Age Children</b> Met all health and safety tag requirements	<input type="checkbox"/>	

Licensing Specialist Name Charlene Langsdorf	Visit Date 11/19/2024	Issue Date 11/25/2024
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