Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
7/16/2026		

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
Mps - Camp Lowell	2000563892 / 056 - 2100208

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
4360 S 20Th St Milwaukee, WI 53221-2367	414-393-4148	7/1/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)6. **Child Record - Health History** Description: Documentation of complete health history for Child 1 and Child 3, who have identified medical conditions, was not observed.	Parents of child 1 and child 3 will be contacted to complete the health history form.	7/24/2026	
2	251.04(6)(a)6m. **Child Record - Immunization History** Description: Documentation that indicates the child's immunization history is in compliance was not observed for Child 1.	Parents of child 1 will be contacted to provide complete immunization history.	7/24/2026	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.06(2)(d) **Access To Materials Potentially Harmful To Children** Description: Lysol Disinfectant wipes, and glass cleaner labeled "Keep out of reach of children," were accessible to children.	Staff will ensure potentially harmful materials are kept out of reach of children.	7/6/2026	

NAME - Certification Worker / Licensing Specialist

Tiisha Harrell / Crescenta Sabree

Date Issued

7/2/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed

8/5/2026