Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
10/30/2026		262-446-7800

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
St Johns Lutheran Church Preschool	6000577936 / 001 - 1001497

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
20275 Davidson Rd Brookfield WI 530453552	262-786-4298	10/15/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)1. **Child Record - Enrollment Information** Description: There was missing information on the child enrollment form for Child 4.	Confirmed with family if they wanted to add an email to the missing box and added that information, wrote 'n/a, for other two blank boxes.	10/16/2026	
2	251.05(2)(a)4.a. **Staff Record - Registry Certificate** Description: There was no documentation of a Registry Certificate for Staff D.	Staff member will renew her registry profile and new certificate will be added to the staff file as soon as available.	Nov./ Dec. 2026 (or as soon as cert. is available)	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.07(6)(dm)4. **Medical Log - Reviewing Injury Records** Description: There was no documentation of a six month review of the medical log book.	All log book reviews will be signed off with 'date and name of reviewer' moving forward.	10/16/2026	

NAME - Agency Worker
Rhonda Brueggemann

Date Issued
10/15/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
10/16/2026