

Date Correction Plan Due 2/2/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-930-1148
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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 Michelle's Little Ones		Provider Number / Facility ID Number 4000580184 / 001 - 1009172	
Address - Facility (Street, City, State, Zip Code) 251 Hewitt St Eau Claire WI 54703		Telephone Number 715-832-3098	Date - Regulation Visit 1/17/2024
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 250.04(3)(d) Report - Plan Of Correction Description: On 9/14/23, a licensing visit was conducted at the center and a non-compliance statement was issued for violations that were found at that time. A correction plan for the violations was due to the Department by 10/7/23. The licensee did not return a correction plan. On 10/23/23, the licenser emailed the licensee to request a correction plan again. As of 1/17/24, the licensee has not returned a correction plan for the violations found on 9/14/23.	<div style="text-align: center;"> Received State of Wisconsin FEB 3 2024 DCF DECE BECR WRO </div> <p style="font-size: 1.2em; font-family: cursive;"> Sorry did not see an Email Dont have Time To look I did send Everything Back A couple of weeks after you were Here, Along with my Dogs rabies vaccine Paper sorry you didnt get it </p>	<p style="font-size: 1.5em; font-family: cursive;">1-28-24</p>	

NAME - Agency Worker
Heather Ruf

Date Issued
1/17/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Michelle Prigel

Date Signed

1-28-24