

Date Correction Plan Due 4/6/2026	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	TO FILE A COMPLAINT CALL 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)(l) 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>		<b>Provider Number / Facility ID Number</b>		
Little Tigers Child Care		8000589408 / 001 - 2005175		
<b>Address - Facility (Street, City, State, Zip Code)</b>		<b>Telephone Number</b>	<b>Date - Regulation Visit</b>	
107 Jodie Kaye Ct Wrightstown WI 541801203		920-471-8082	3/19/2026	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	250.05(3)(fm) <b>Biennial Training - Child Abuse &amp; Neglect</b>  Description: On 3/19/26, there was not a current mandated reporter training in the file. Verification was received it is now completed on 3/19/26.	Thought I did it. haven't found it.	3/19/26	3/19/26
2	250.05(4)(c)4. <b>Continuing Education - Documentation Of 12 Month Period</b>  Description: On 3/19/26, there was less than 15 hours of continuing education completed for 2025 in the file.	time Management will be better.	3-20-26	3-20-26

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3	250.07(6)(f)1.a. Medication Administration - Parent Authorization  Description: On 3/19/26, there was an authorization for ibuprophen that did not have dates completed for the time the authorization was valid.	Ibuprophen wasn't used. It was dropped off that morning in case. Also had printer fixed on 3.25.26	3/19/26
			3/19/26

NAME - Agency Worker  
Jessica Farah

*Elizabeth Zendeley*

4/14/26

Date Issued  
3/23/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed