Date Correction Plan Due 9/21/2026	**NONCOMPLIANCE STATEMENT AND CORRECTION PLAN**	TO FILE A COMPLAINT CALL 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**	
Bright Scholars Kiddie Academy		3000593453 / 001 - 2008471	
Address - Facility (Street, City, State, Zip Code) 5806 W Burleigh St Milwaukee WI 532101516		**Telephone Number** 414-231-9204	**Date - Regulation Visit** 9/3/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(2)(k) **License Posted & Visible** Description: License was not posted or visible to the public in childcare center	posted on parent board 9/3/26	9/3/26	
2	251.04(6)(a)1. **Child Record - Enrollment Information** Description: Child 2 & 5 did not have authorization questions complete on enrollment form	Everything has been marked and completed of 9/3/26	9/3/26	

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3	251.05(2)(a)3.a. **Staff Record - Physical Examination** Description: Staff A, B & E did not have a complete health report in file for review.	Staff A completed 9/17/26. Staff B and E last day of employment was 8/23/26	9/21/26	
4	251.05(3)(b) **Abusive Head Trauma Prevention Training** Description: Staff B did not have a AHT certificate or documentation of completion in file for review	Staff B last day of employment was 8/23/26	9/11/26	
5	251.06(2)(a) **Potential Source Of Harm On Premises** Description: A knife was observed in kitchen area accessible to children in care passing through area.	Knife was locked away in cabinet 9/3/26		
6	251.06(9)(b)3. **Manual Dishwashing - 3-Step Procedure** Description: Sanitizer method was not observed as being used for 3 step method of manual dish washing	Dish tub ordered to complete the 3 step method. 9/5/26	9/7/26	

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Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**

NAME - Agency Worker
Tiarra Trammell

Date Issued
9/14/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
9/20/26