Key. The information on the key is confidential and is meant for your reference only.

Please take a few minutes to complete the Department of Children and Families (DCF) customer satisfaction survey so that you can tell us about your experience. The responses we receive to the survey will be compiled and reviewed by DCF staff to help us improve our services to child care providers. The survey takes approximately 5 minutes to complete. It is voluntary and anonymous, and there is no penalty for not responding. DCF staff will not be able to tell whether or not you responded to the survey or know what responses you submitted. Please follow this link to provide your feedback : https://www.surveymonkey.com/r/LicenseFeedback. Or, if you don't have internet access, contact your licensing office and request a paper version of the survey and a prepaid reply envelope .

Contact me if you have any questions.

DEPARTMENT OF CHILDREN AND FAMILIES STATE OF WISCONSIN Division of Early Care and Education

NONCOMPLIANCE STATEMENT AND CORRECTION

Date Correction Plan Due TO FILE A COMPLAINT CALL 5/18/2026 608-422-6765

PLAN

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

Joyful Hearts Learning Center - Lm Moravian Church

Provider Number / Facility ID Number 7000593567 / 001 - 2008568

Iress - Facility (Street, City, State, Zip Code) College St Lake Mills WI 535511408	**Telephone Number** 920-342-0498	**Date - Regulatio** **Visit**5/4/2026
Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected** **Completion Date**
251.07(2)(e) **Child Guidance - Prohibited Actions** Description: The center reported that a staff member engaged in a prohibited action that may have been emotionally or physically painful, discomforting or potentially injurious to a child when a teacher grabbed and forcefully picked up a child by one arm out of frustration.	This behavior is unacceptable by all staff and the staff member was immediately let go.	Staff let go 4/29/2026 NC-returned 5/4/2026

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Verification Date

NAME - Agency Worker Michelle Garcia
Date Issued 5/4/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee Date Signed

Heidi Krueger, Director, Joyful Hearts Learning Center 5/4/2026