

**Compliance Statement**  
**Licensed Group Child Care Centers**

TO FILE A COMPLAINT, CALL: (715) 930-1148

**Use of Form** Completion of this form meets the requirements of ch. 48, Wis. Stats., and provides the licensee with a summary of the results of the licensing visit.

**Instructions - Licensing Specialist** When no violations are observed during a visit, check the sections of the administrative code monitored. If you didn't monitor the entire section, you may also reference the specific subsections, paragraphs, and subdivisions that were completed.

**Instructions - Licensee** Post the Compliance Statement near the license in accordance with s.48.657, Wis. Stats. Please take a few minutes to complete the DCF customer satisfaction survey and tell us about your visit experience. The survey takes approximately 5 minutes to complete. It is voluntary and anonymous, and there is no penalty for not responding. Follow this link to provide your feedback: <https://www.surveymonkey.com/r/LicenseFeedback>. If you don't have Internet access, contact your licensing office for a paper version of the survey.

Facility Name New Richmond Cesa 11 Head Start	Facility Address (Street, City, State, Zip Code) 118 Homestead DR New Richmond, WI 540172594	Telephone Number (715) 246-3232	Facility ID 2000126
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**NO ADMINISTRATIVE CODE VIOLATIONS WERE OBSERVED DURING THIS LICENSING VISIT.**

The following checked items indicate the sections and / or partial sections of the administrative code that were monitored on this visit.

<input checked="" type="checkbox"/>	<b>Operational requirements</b> Reviewed: Reports; Some Children's Records; Reporting Abuse/Neglect	<input checked="" type="checkbox"/>	<b>Staff</b> Reviewed: Some Staff Records; Qualifications
<input checked="" type="checkbox"/>	<b>Physical plant and equipment</b> Reviewed: Building; Protective Measures; Fire; Water; Indoor/Outdoor Space; Emergency Drills	<input checked="" type="checkbox"/>	<b>Program</b> Reviewed: Program Planning; Equipment/Furnishings; Rest Periods; Meals/Snacks; Health
<input checked="" type="checkbox"/>	<b>Transportation</b> N/A	<input checked="" type="checkbox"/>	<b>Infant and toddler care</b> N/A
<input checked="" type="checkbox"/>	<b>Care of school-age children</b> N/A	<input checked="" type="checkbox"/>	<b>Night care</b> N/A

Licensing Specialist Name Bonnie Davis	Visit Date 12/3/2024	Issue Date 12/9/2024
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