DEPARTMENT OF CHILDREN AND FAMILIES

Division of Early Care and Education

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.

Specialist

Instructions - Licensing 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		Facility Address (Street, City, State, Zip Code)		Zip Code)	Telephone Number	Facility ID
Chippewa Falls Cesa 11 Head Start		Chippewa Falls, WI 54729		(715) 723-1211	1009552	
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.						
~	Operational requirements			Staff		
			_			
>	Physical plant and equipment		>	Program		
>	Transportation -NA		>	Infant and toddler card	е	
>	Care of school-age children -NA		>	Night care -NA		
Liconsi	ng Specialist Name				Visit Date	Issue Date
Licensing Specialist Name Sou Yang					10/27/2023	10/31/2023