Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION	TO FILE A COMPLAINT CALL
3/29/2021	PLAN	920-785-7811

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

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 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 notice of the sanction and / or penalty and your appeal rights.

	e - Certified Operator / Licensed Center	Provider Number / Facility ID Number		
Lake Edge Learning Center 7000577947 / 001 - 420101				
Address - Facility (Street, City, State, Zip Code) 1511 Nicolet Blvd Neenah WI 54956		Telephone Number 920-725-6139	Date - Regulation Visit 2/8/2021	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)5. Child Record - Alternate Arrival / Release Agreement	All families participating in the alternative 4k programs	ulialai	Date
	Description: A 4K child's file to contain an alternate arrival and release agreement.	recieved an alternative arrival release form. These will be	,	
		completed, returned, 3 filed	:	

accordingly.

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DEPT OF CHILDREN & FAMILIES NORTHEASTERN REGION

Name - Certified Operator / Licensed Center  Lake Edge Learning Center	1	rider Number / Facility ID No	ımber
Address - Facility (Street, City, State, Zip Code) 1511 Nicolet Blvd Neenah WI 54956	7000 Telephone Number 920-725-6139	7000577947 / 001 - 420101  Date - Regulation Visit 2/8/2021	
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification
251.055(1)(h)  Procedure If Absent Without Prior Notification  Description: 1/19/21 the center failed to contact the parent when a child is absent from the cntr w/out prior notification to return from 4K from the bus. 3 staff were made aware that the had not returned to the cntr, no call was made to parent to check child's whereabouts. The cntr was notified by the bus company the child was found on the bus while putting the bus away for the night. The child was returned to the cntr safely and the parent was notified at that time. Violation is the result of a self-reported incide by the center as required by licensing. Warning issued.	hand book.  We will be adding a section describing the procedures	6/30/21	Date
251.06(9)(d)1.a.  Food Storage - Perishable, Potentially Hazardous Food  Description: Milk failed to be maintained at 40d F. Milk gallons we being sent to classrooms for lunch and then returned to the refrigerator, this day the milk placed back in the refrigerator after It was -whole milk gallon 50d and 2% 58d.	Milk will be distributed to classrooms in pitchers.	3/1/21	

NAME - Certification Worker / Licensing Specialist		
Ruth Sprangers		Date Issued
SIGNATURE - Contined Operator or Designee / Licensee or Desi		3/15/2021
AMAR Supplies of Desi	nee .	Date Signed
DCF-F-CFS0294-E (R.06/2014)		3/24/21
DOI -1-0-30294-E (K.08/2013)		