

**NONCOMPLIANCE STATEMENT AND CORRECTION PLAN**

TO FILE A COMPLAINT CALL  
262-446-7800

Date Correction Plan Due  
3/27/2026

**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)(f) and (3)(d), DCF 251.04(2)(L) and (3)(f), DCF 252.41(1)(k) 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.

Provider Number / Facility ID Number  
7000584747 / 002 - 1015838

Name - Certified Operator / Licensed Center  
Crescent Learning Center

Address - Facility (Street, City, State, Zip Code)  
801 W Layton Ave Milwaukee WI 532212426

Telephone Number  
414-484-2925

Date - Regulation Visit  
3/3/2026

Rule/Statute Number	Correction Plan	Expected Completion Date	Verification Date
<p>1 251.04(6)(a)1. <b>Child Record - Enrollment Information</b></p> <p>Description: Child 3 and Child 4 had incomplete enrollment information available for review at the time of the monitoring visit. The incomplete information included parents information, authorized persons information and emergency contact information.</p>	<p>The information that was missing is due to the parents not wanting to give the email address besides that other information has been pulled out on the respected form</p>	3/9/26	
<p>2 251.04(6)(a)6m. <b>Child Record - Immunization History</b></p> <p>Description: Child 1 did not have records of immunizations available for review at the time of the monitoring visit.</p>	<p>The parent has been asked to kindly submit the record ASAP</p>	3/30/26	

Name - Certified Operator / Licensed Center  
Crescent Learning Center

Provider Number / Facility ID Number  
7000584747 / 002 - 1015838

Address - Facility (Street, City, State, Zip Code)  
801 W Layton Ave Milwaukee WI 532212426

Telephone Number  
414-464-2925

Date - Regulation Visit  
3/3/2026

Rule/Statute Number  
Noncompliance Statement

Correction Plan

Expected  
Completion Date

Verification  
Date

3 251.05(4)(c)9.  
Continuing Education - Documentation Of 12 Month Period

Description: Staff A has no documentation for Continuing Education for the year of 2025 available for review at the time of the monitoring visit. Staff B and Staff C had incomplete documentation of Continuing Education for 2025 available for review at the time of the monitoring visit.

Staff has enrolled in Embedding Respectful and Responsive Care and also in Supporting Autism in Early Childhood setting.

4/27/26

4

251.09(1)(c)  
Infant & Toddler - Documenting Changes In Development

Description: Infant and Toddler intakes for one child reviewed was not updated within the past three months.

Repeat violation: Previously cited on 3/27/2024

It was taken care right away.

3/3/26

NAME - Agency Worker

Mindi Sabljak, Rhonda Brueggemann

Date Issued

3/9/2026

Date Signed

3/12/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

*Mindi Sabljak*