Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
9/7/2026		262-446-7800

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		Provider Number / Facility ID Number
Caring Angels Learning Center Llc		5000585805 / 002 - 2009069
Address - Facility (Street, City, State, Zip Code)	**Telephone Number**	**Date - Regulation Visit**
9740 W Teresa Ln Milwaukee WI 532244652	414-975-1170	7/7/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(3)(j) **Report - Change In Transportation Services** Description: Report- Change In Transportation Services- not reported to the ILS prior to transporting children.	I emailed on 7-8-26 that I have Transportation Info DONE	7-8-26	
2	250.08(2) **Permission And Emergency Information**	All forms are DONE	7-8-26	7/29/2026

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3	250.08(3) **Required Information For Each Trip** Description: Required Information for each trip- ILS was not able to verify information for trips completed with children.	All Done	7-29-26	7/29/2026
4	250.08(4)(b) **Driver Training - Documentation** Description: Driver Training Documentation- Provider did not provide a completed Driver Training evidence.	All Done I enrolled	8-1-26	/
5	250.08(4)(c)1. **Driver Record - Obtain & Review** Description: Driver Record- Obtain And Review- not a for review.	All Done	7-8-26	/
6	250.08(5)(a)1. **Vehicle Requirements - Registration** Description: Vehicle Requirements-Vehicle Registration not provided prior to transporting children.	All Done	7-8-26	7/29/2026

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7	250.08(5)(b) **Vehicle Inspection Form** Description: Vehicle Inspection Form- not provided prior to transporting children.	All Done You Looked	7-10-24	
8	250.08(5)(c) **Vehicle Liability Insurance** Description: Vehicle Liability Insurance- not verified prior to transporting children.	All Done You Looked	7-7-26	
9	250.08(5)(e) **Child Safety Alarm Inspection** Description: Child Safety Alarm Inspection- not verified prior to transporting children.	All Done You already Look	7-10-29	
10	250.08(8)(a) **Vehicle Safety Alarm - Installed** Description: Vehicle Alarm Installed- vehicle did not have an alarm installed.	All Done	7-10-26	7/29/2026

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
		All My Papers has been approved and submitted and Dave approved when my boss error came out.	7-29-26	

NAME - Agency Worker
Tammy Saffold

Date Issued
8/24/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
8-25-26