Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
9/3/2026		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
Forever Royalty Family Childcare	8000592228 / 001 - 2007423

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
3278 N 12Th St Milwaukee WI 532062801	601-317-4990	8/17/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)2. **Child Record - Field Trip Permission** Description: Documentation of written authorization from the parent indicating that the child has permission to participate in fields trips and other off-premises activities was not observed for Child 2.	parent's contacted to complete files and give updated paper work. * files completed *		
2	250.04(6)(a)4.b. **Child Record - Physical Exam - Over 2, Under 5** Description: Documentation of a health examination for each child who is at least 2 years of age but who is not 5 years of age or older was not observed for Child 1, Child 2, and Child 3.	parent's contacted to complete files and give updated paper work. * files completed *		

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Forever Royalty Family Childcare		8000592228 / 001 - 2007423	
Address - Facility (Street, City, State, Zip Code) 3278 N 12Th St Milwaukee WI 532062801	**Telephone Number** 601-317-4990	**Date - Regulation Visit** 8/17/2026	
	Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
3	250.04(6)(a)4m. **Child Record - Immunization History Compliance** Description: Documentation that a child's immunization history is in compliance was not observed for Child 2.	parent's contacted to complete files and gives center updated paperwork.		
4	250.04(6)(a)5. **Child Record - Consent For Emergency Medical Treatment** Description: Documentation of written permission from the parents for medical attention to be sought if a child is injured was not observed for Child 1.	parents contacted to complete files and give updated paperwork. *files completed*		

NAME - Agency Worker
Tiisha Harrell, Crescenta Sabree

Date Issued
8/20/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Tina Crear - owner/operator.

Date Signed
8/21/26