

Date Correction Plan Due 11/12/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-361-7700
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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 Kids Kountry Day Care		Provider Number / Facility ID Number 2000556772 / 002 - 1007241		
Address - Facility (Street, City, State, Zip Code) 158347 Evergreen Rd Wausau WI 544036149		Telephone Number 715-675-0402	Date - Regulation Visit 10/27/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)3. Child Record - Alternate Arrival / Release Agreement Description: Child 5, 6, 7 and 8 did not have the alternate arrival/release agreement on file.	printed the forms and had parents sign them in the future I will have forms ready for the school year	10/28/25	

RECEIVED
State of Wisconsin

NOV 20 2025

Department of Children and Families
Under Region

NAME - Agency Worker
Bonnie Davis

Date Issued
10/29/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Peggy S. Bliese

Date Signed

11-11-25