**Date Correction Plan Due** 10/13/2021 NONCOMPLIANCE STATEMENT AND CORRECTION PLAN TO FILE A COMPLAINT CALL 262-446-7800

may submit plans of correction however are not required to do so. 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 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) 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.

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 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 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 of the sanction and / or penalty and your appeal rights. The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. 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

notic	Name - Certified Operator / Licensed Center	Provider	Provider Number / Facility ID Number	ber
Hol	Holy Cross Preschool	600057	6000570736 / 001 - 1006449	
Add W1	Address - Facility (Street, City, State, Zip Code) W156n8131 Pilgrim Rd Menomonee Fls WI 530513728	Telephone Number 262-502-4104	Date - Regulation Visit 9/15/2021	Isit
	Rule/Statute Number	Correction Plan	Expected Completion Date	Verification Date
	ords	A Notation has been made in the preschool calendar	0/15/2021	
	Description: The medical log books have not been reviewed every 6 months (last reviewed 11/2020).	to review medical logs.		
***************************************				

NAME - Certification Worker / Licensing Specialist

Laura Taylor, Joel Marquez

9/29/2021 Date Issued

SIGNATURE - Certified Operator or Designee, / Licensee or Designee

10/4/202

Date Signed