

DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due
3/4/2026

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL
608-422-8765

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 250.042(1) and (3)(b), DCF 251.042(1) and (3)(b), DCF 252.411(1)(3) and (2)(a). 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 notice of the sanction and / or penalty and your appeal rights.

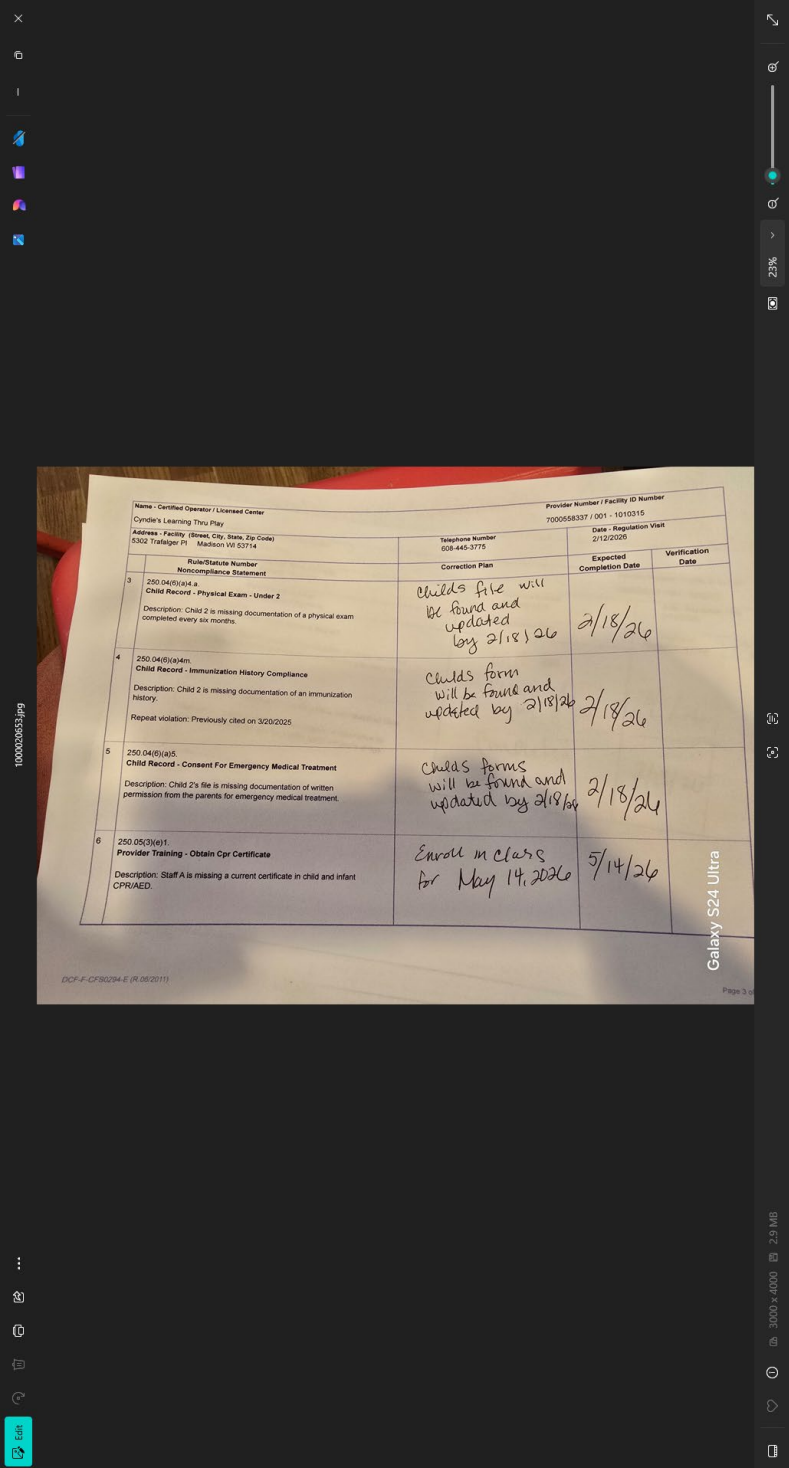
Name: Certified Operator / Licensed Center
Cyndie's Learning Thru Play
Address - Facility (Street, City, State, Zip Code)
5302 Trafalgar Pl Madison WI 53714
Telephone Number
608-445-3775
Date - Regulation Visit
2/12/2026
Provider Number / Facility ID Number
7000558337-001-1010315

Rule/Statute Number	Correction Plan	Expected Completion Date	Verification Date
250.046(1)(b) Child Record - Maintenance, Availability Description: Child 2's file was unavailable and could not be located during the licensing visit.	File will be found and updated by 2/18/26	2/18/26	
250.046(1)(1)(c) Child Record - Health History Description: Child 2 is missing a health history record.	File will be found and updated by 2/18/26	2/18/26	

Galaxy S24 Ultra

100002055395

3000 x 4000 3.4 MB



Name - Certified Operator / Licensed Center
Cydler's Learning Thru Play
Address - Facility (Block, City, State, Zip Code)
5302 Tallager Pl Madison WI 53714

Provider Number / Facility ID Number
700558337 / 001 - 1010315

Telephone Number
608-445-3775

Date of Registration Visit
2/12/2026

Rule/Statute Number Non-compliance Statement	Correction Plan	Expected Completion Date	Verification Date
250.04(6)(a)4.a Child Record - Physical Exam - Under 2 Description: Child 2 is missing documentation of a physical exam completed every six months.	Childs file will be found and updated by 2/18/26	2/18/26	
250.04(6)(a)4.n Child Record - Immunization History Compliance Description: Child 2 is missing documentation of an immunization history. Repeat violation: Previously cited on 3/25/2025	Childs form will be found and updated by 2/18/26	2/18/26	
250.04(6)(a)5 Child Record - Consent For Emergency Medical Treatment Description: Child 2's file is missing documentation of written permission from the parents for emergency medical treatment.	Childs forms will be found and updated by 2/18/26	2/18/26	
250.05(3)(e)1. Provider Training - Obtain Cpr Certificate Description: Staff A is missing a current certificate in child and infant CPR/AED.	Enroll in class for May 14, 2026	5/14/26	

