

Compliance Statement
Licensed Group Child Care Centers

TO FILE A COMPLAINT, CALL: (715) 361-7700

Use of Form Completion of this form meets the requirements of ch. 48, Wis. Stats., and provides the licensee with a summary of the results of the licensing visit.

Instructions - Licensing Specialist When no violations are observed during a visit, check the sections of the administrative code monitored. If you didn't monitor the entire section, you may also reference the specific subsections, paragraphs, and subdivisions that were completed.

Instructions - Licensee Post the Compliance Statement near the license in accordance with s.48.657, Wis. Stats. Please take a few minutes to complete the DCF customer satisfaction survey and tell us about your visit experience. The survey takes approximately 5 minutes to complete. It is voluntary and anonymous, and there is no penalty for not responding. Follow this link to provide your feedback: <https://www.surveymonkey.com/r/LicenseFeedback>. If you don't have Internet access, contact your licensing office for a paper version of the survey.

Facility Name Wood County Head Start-Wr Biron	Facility Address (Street, City, State, Zip Code) 550 Center ST Wisc Rapids, WI 544941815	Telephone Number (715) 421-2066	Facility ID 1013542
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NO ADMINISTRATIVE CODE VIOLATIONS WERE OBSERVED DURING THIS LICENSING VISIT.

The following checked items indicate the sections and / or partial sections of the administrative code that were monitored on this visit.

<input checked="" type="checkbox"/> Operational requirements Partial review of children's records.	<input checked="" type="checkbox"/> Staff Partial review of staff records and qualifications.
<input checked="" type="checkbox"/> Physical plant and equipment Partial review of protective measures, indoor space, emergency plans and drills.	<input checked="" type="checkbox"/> Program Patial review of program planning, child guidance and equipment and furnishings.
<input checked="" type="checkbox"/> Transportation Review of safety restraints, capacity and supervision and vehicle safety alarm.	<input type="checkbox"/> Infant and toddler care N/A
<input type="checkbox"/> Care of school-age children N/A	<input checked="" type="checkbox"/> Night care N/A

Licensing Specialist Name Tiisha Harrell	Visit Date 11/22/2024	Issue Date 12/2/2024
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