

<b>Date Correction Plan Due</b> 3/26/2025	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 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	
Wauwatosa Dc And Lrng Ctr - Glenview		0000591210 / 002 - 2006375	
Address - Facility (Street, City, State, Zip Code) 822 Glenview Ave Wauwatosa WI 532133308		Telephone Number 414-479-3050	Date - Regulation Visit 3/12/2025
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 251.04(6)(a)1. <b>Child Record - Enrollment Information</b>  Description: There was no authorized person listed on the child enrollment form for Child #2.  Repeat violation: Previously cited on 9/5/2023	The parent has updated the child's child Enrollment Form to state there are no authorized persons to list.	3.12.2025	3.12.2025
2 251.06(9)(d)1.b. <b>Food Storage - Refrigeration Units</b>  Description: The freezer temperature in the infant room read 18 degrees Fahrenheit.  Repeat violation: Previously cited on 10/14/2024	The temperature gauge has been adjusted to lower the temperature in that freezer + we will only allow that freezer to be used to store breast milk.	3.12.2025	3.12.2025

<b>Name - Certified Operator / Licensed Center</b> Wauwatosa Dc And Lrng Ctr - Glenview		<b>Provider Number / Facility ID Number</b> 0000591210 / 002 - 2006375	
<b>Address - Facility (Street, City, State, Zip Code)</b> 822 Glenview Ave Wauwatosa WI 532133308		<b>Telephone Number</b> 414-479-3050	<b>Date - Regulation Visit</b> 3/12/2025
<b>Rule/Statute Number</b> Noncompliance Statement	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>

**NAME - Agency Worker**  
 Katrina Tarantino

**Date Issued**  
 3/12/2025

**SIGNATURE - Certified Operator or Designee / Licensee or Designee**

*Katrina Tarantino*

**Date Signed**

3.13.2025