

Date Correction Plan Due 4/3/2026	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 608-422-6765
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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 St. John's Child Development Center		Provider Number / Facility ID Number 2000572872 / 001 - 1004992		
Address - Facility (Street, City, State, Zip Code) 426 W Emmett St Portage WI 53901		Telephone Number 608-742-9000	Date - Regulation Visit 3/20/2026	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(3)(a) Report - Incident Or Accident Description: The Center failed to report to the Department within 24 hours of becoming aware that a child, who suffered an injury while in its care on March 12, 2026, received medical assistance. The incident was self-reported on March 18, 2026.	<i>Review + trained on reporting all injury within 24 hours to Licensor. Procedure now posted in office board. no matter who is lead, can now report.</i>	<i>3-24-26</i>	

NAME - Agency Worker Luzdarys Marquez	Date Issued 3/24/2026
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SIGNATURE - Certified Operator or Designee / Licensee or Designee <i>Diana A. Row</i>	Date Signed <i>3-24-26</i>
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