

|   |  |   |
|---|--|---|
| <b>Date Correction Plan Due</b><br>3/9/2026 | <b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b> | <b>TO FILE A COMPLAINT CALL</b><br>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    |   |
|---|--|---|---|
| Mukwonago Y Before And After - Evergreen  |  | 4000558914 / 031 - 2006609              |   |
| <b>Address - Facility (Street, City, State, Zip Code)</b><br>817 W Main St Waterford WI 531854025   |  | <b>Telephone Number</b><br>262-409-2974 | <b>Date - Regulation Visit</b><br>2/12/2026 |
| Rule/Statute Number<br>Noncompliance Statement  | Correction Plan  | Expected<br>Completion Date             | Verification<br>Date                        |
| 1<br>251.04(3)<br><b>Written Report To Department</b><br><br>Description: Based on an incident in the medical log book, on 9/19/25, police were contacted after a child left the premise. The center did not report police contact within 24 hours, as required.                  | Review with staff to contact licensor about center reports.  | 2/23/26                                 |   |
| 2<br>251.04(6)(b)<br><b>Current, Accurate Daily Attendance Record</b><br><br>Description: On the day of the licensing visit, departure times were missing for 8 children that were released from the center to the school.<br><br>Repeat violation: Previously cited on 2/12/2024 | Review with staff child sign outs in AM care for safety of proper documentation of childs whereabouts. | 2/23/26                                 |   |

|   |   |  |   |
|---|---|--|---|
| <b>Name - Certified Operator / Licensed Center</b><br>Mukwonago Y Before And After - Evergreen    |   | <b>Provider Number / Facility ID Number</b><br>4000558914 / 031 - 2006609        |   |
| <b>Address - Facility (Street, City, State, Zip Code)</b><br>817 W Main St Waterford WI 531854025 |   | <b>Telephone Number</b><br>262-409-2974  | <b>Date - Regulation Visit</b><br>2/12/2026 |
| <b>Rule/Statute Number</b><br><b>Noncompliance Statement</b>                                      |   | <b>Correction Plan</b>   | <b>Expected Completion Date</b>             |
| 3   | 251.055(1)(f)<br><b>Child Tracking Procedure</b><br>Description: On the day of the monitoring visit, the teacher supervising a group of 7 children in the outdoor play space was not adhering to the center's tracking procedure. The teacher reported leaving the clipboard used for attendance and tracking inside the building.<br>Repeat violation: Previously cited on 2/12/2024 | Review child tracking procedures - always have a notebook with in case with you! | 2/23/20                                     |
|   |   |  | <b>Verification Date</b>                    |

**NAME - Agency Worker**  
 Kristin Lange, Daniel Noel

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


Date Issued: 2/23/2026  
 Date Signed: 2/23/2026