

Date Correction Plan Due 12/4/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN
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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. 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 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 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. Complete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each of the listed noncompliance date(s) for each item. Return the original to your certification / licensing specialist for approval and retain a copy. If this is a license noncompliance statement and correction plan near the license in accordance with Wis. Stat. 48.657. This request for a correction plan 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, notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center		Provider ID
Seventh Heaven Day Care		80005691
Address - Facility (Street, City, State, Zip Code) 88 E 6Th St Buffalo City WI 546227346		Telephone Number 608-248-3019
	Rule/Statute Number Noncompliance Statement	Correction Plan
1	250.055(2)(b) Maximum Number Of Children In Care Of The Provider Description: The provider acknowledged an oversight wherein, for a period of time on 09/04/2025, she exceeded the number of children for which one provider may care for.	I have gotten my numbers within regulatory guidelines.

NAME - Agency Worker April Callihan	Date 11/2
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SIGNATURE - Certified Operator or Designee / Licensee or Designee 	Date 11-28-2025
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