

Date Correction Plan Due 7/7/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
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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 Elkhart Lake - Glenbeulah School	Provider Number / Facility ID Number 0000575600 / 001 - 2100659
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Address - Facility (Street, City, State, Zip Code) 251 E Maple St Elkhart Lake WI 530201975	Telephone Number 920-876-2856	Date - Regulation Visit 6/16/2025
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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(2)(a)2. Staff Record - Completed Background Check Description: Staff member B- missing documentation of completed background check in file. Repeat violation: Previously cited on 6/17/2024	All Staff background check completion document is on file in district office. All staff must have background check to begin working in our district. Superintendent said to call HS Office 920-876-3331 if you need to see it.	6/16/2025	
2	251.05(3)(b) Abusive Head Trauma Prevention Training Description: Staff member B-Missing documentation of completed Abusive Head Trauma Training in file. Email from provider verification of completion of training on 6/20/25. Repeat violation: Previously cited on 6/17/2024	Staff B had AHT on 8/2024 - just needed to file copy of completion within childcare files in room.	7/3/2025	

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3	251.05(3)(cm) Child Abuse & Neglect - Biennial Training Description: Staff members A, B, and E-missing documentation of completed and up to date Mandated Reporter training. (renew every other year) Repeat violation: Previously cited on 6/17/2024	Staff A - completed w/ District 8/2024 Completed again 6/20/2025 for childcare Staff B - completed training w/ Plymouth School District 8/2024 Staff E - training completed 9/2023 copy was in binder. will complete again @ in-service 3/2025	6/20/25 7/3/2025 6/17/2025

NAME - Agency Worker
Jessica Farah, Jill Kellner

Date Issued
6/23/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Karrie M. Coyle

Date Signed
7/21/25