

Date Correction Plan Due
5/26/2021

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL
920-785-7811

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 Elena's Family Learning Center		Provider Number / Facility ID Number 0000587700 / 001 - 2001148		
Address - Facility (Street, City, State, Zip Code) 1128 Durango Dr Hartford WI 530272083		Telephone Number 262-278-6048	Date - Regulation Visit 5/10/2021	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)1. Child Record - Enrollment & Health History Forms Description: Based upon review on May 10, 2021, Child 3 & 4 of the Child Record Checklist did not have any contact information on file for persons authorized to call for/receive child.	Emailed Proof of form's back on (MB) May 20th 2021.		
2	250.04(6)(a)4.b. Child Record - Physical Exam - Over 2, Under 5 Description: Based upon review on May 10, 2021, Child 1 and 4 of the Child Record Checklist did not have a current Child Health Report form on file.	Emailed Proof of form's back on (MB) May 20th 2021.		

Name - Certified Operator / Licensed Center

Elena's Family Learning Center

Provider Number / Facility ID Number

0000587700 / 001 - 2001148

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1128 Durango Dr Hartford WI 530272083

Telephone Number

262-278-6048

Date - Regulation Visit

5/10/2021

Rule/Statute Number
Noncompliance Statement

Correction Plan

Expected
Completion Date

Verification
Date

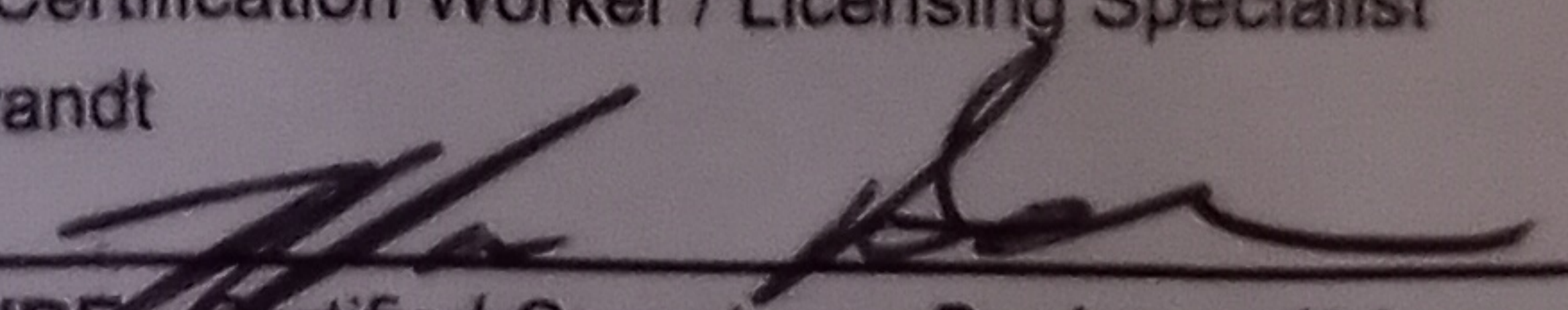
Emailed all forms
required for Proof
on May 20th 2021.
MB

NAME - Certification Worker / Licensing Specialist

Jamie Brandt

Date Issued

5/12/2021

SIGNATURE  Certified Operator or Designee / Licensee or Designee

Date Signed

5/20/21