

<b>Date Correction Plan Due</b> 9/9/2025	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 920-785-7811
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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.

<b>Name - Certified Operator / Licensed Center</b>		<b>Provider Number / Facility ID Number</b>		
The Peanut Gallery Cc And Lrng Ctr		2000587762 / 001 - 2001273		
<b>Address - Facility (Street, City, State, Zip Code)</b>		<b>Telephone Number</b>	<b>Date - Regulation Visit</b>	
315 S Adams St Valders WI 542459207		920-953-4000	8/21/2025	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.04(6)(a)8.a. <b>Child Record - Physical Exam - Under 2</b>  Description: 2 children, #7 and #8, did not have a current (once every 6 months) physical in their file - see checklist.	Notice given to families requesting completion.	9/26/25	
2	251.09(1)(c) <b>Infant &amp; Toddler - Documenting Changes In Development</b>  Description: in the 9-18 month room 1 child was missing an intake form - staff said it was sent home to update, and in the 18-30 month room one child had an intake form that was not updated once every 3 months.  Repeat violation: Previously cited on 3/12/2025	Forms have been submitted to families for completion.	9/12/25	

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Rule/Statute Number  
Noncompliance Statement

Correction Plan

Expected  
Completion Date

Verificator  
Date

NAME - Agency Worker  
Jill Kellner

Date Issued  
8/26/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

*Jackie Kessow*

Date Signed

8/29/25