DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
10/28/2026		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
Little Sprouts Paradise	2000593042 / 001 - 2008115

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
4635 West Melvina Street Milwaukee WI 53216	414-865-1364	10/6/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)4.a. **Child Record - Physical Exam - Under 2** Description: Child #1 and #3 do not have an updated physical examination on file for review as required every 6 months for children under age 2 (last updated in file 12/19/2024 for #1 and 10/16/2025 for #3).	I will make sure the children have their child health report.	10/27/26	
2	250.04(6)(b) **Current, Accurate Daily Attendance Record** Description: Six children were in attendance when licensors arrived but only 5 were signed in on attendance sheets.	I will make sure each child is signed in.	10/27/26	

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3	250.06(2)(a) **Electrical Or Hot Surface Protection** Description: Outlet plug cover missing in front room near fan.	I will make sure the outlet covers are plugged in at all times.	10/27/26	
4	250.06(2)(c) **Access To Materials Potentially Harmful To Children** Description: A container of lighter fluid was observed in the backyard by the play space children use.	I removed the lighter fluid.	10/27/26	

NAME - Agency Worker
Laura Taylor, Joel Marquez

Date Issued
10/14/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Allyson Chu

Date Signed
10/27/26