

Date Correction Plan Due 8/5/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 262-446-7800
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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 notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center Ms Mary's Learning Center	Provider Number / Facility ID Number 2000587192 / 002 - 2006251
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Address - Facility (Street, City, State, Zip Code) 8050 N Port Washington Rd Fox Point WI 532172645	Telephone Number 414-875-0408	Date - Regulation Visit 7/9/2025
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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)6. Child Record - Health History Description: Incomplete health history information for child 4, the document was missing the second page.	To check each Form that Parent has filled out to Make sure All is completed	8/3/25	
2	251.04(6)(a)6m. Child Record - Immunization History Description: Immunizations were missing for children 1, 2, and 4. Repeat violation: Previously cited on 8/6/2024	Have Parents to log into the website to get immunization for child	8/3/25	

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Ms Mary's Learning Center

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.05(2)(a) Staff Record - Maintenance & Availability Description: No file available for staff B.	Place File in a Safe Place	8/3/25	
4	251.07(5)(a)5.a. Menus - Post Description: Menus not posted in a spot visible to parents. Repeat violation: Previously cited on 8/6/2024	Post Menus in kitchen and Parent Board	8/3/25	

NAME - Agency Worker

Cindy Matuszak

Date Issued

7/21/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

8/1/25