

**Compliance Statement**  
**Licensed Group Child Care Centers**

TO FILE A COMPLAINT, CALL: (715) 361-7700

**Use of Form** Completion of this form meets the requirements of ch. 48, Wis. Stats., and provides the licensee with a summary of the results of the licensing visit.

**Instructions - Licensing Specialist** When no violations are observed during a visit, check the sections of the administrative code monitored. If you didn't monitor the entire section, you may also reference the specific subsections, paragraphs, and subdivisions that were completed.

**Instructions - Licensee** Post the Compliance Statement near the license in accordance with s.48.657, Wis. Stats. Please take a few minutes to complete the DCF customer satisfaction survey and tell us about your visit experience. The survey takes approximately 5 minutes to complete. It is voluntary and anonymous, and there is no penalty for not responding. Follow this link to provide your feedback: <https://www.surveymonkey.com/r/LicenseFeedback>. If you don't have Internet access, contact your licensing office for a paper version of the survey.

Facility Name	Facility Address (Street, City, State, Zip Code)	Telephone Number	Facility ID
Canaland Christian Acdmy Early Lrng	801 County Road Hh Stevens Point, WI 544818415	(715) 341-8747	620105

**NO ADMINISTRATIVE CODE VIOLATIONS WERE OBSERVED DURING THIS LICENSING VISIT.**

The following checked items indicate the sections and / or partial sections of the administrative code that were monitored on this visit.

<input checked="" type="checkbox"/>	<b>Operational requirements</b> (3)Reports (6)Child Records (8)Report Abuse	<input checked="" type="checkbox"/>	<b>Staff</b> (2)Staff Records (3)Qualifications
<input checked="" type="checkbox"/>	<b>Physical plant and equipment</b> (1)Building (2)Protective Measures (3)Emergency	<input checked="" type="checkbox"/>	<b>Program</b> (3)Equipment (5)Meals (6)Health
<input checked="" type="checkbox"/>	<b>Transportation</b> NA	<input type="checkbox"/>	<b>Infant and toddler care</b> (1)General
<input type="checkbox"/>	<b>Care of school-age children</b> NA	<input checked="" type="checkbox"/>	<b>Night care</b> NA

Licensing Specialist Name	Visit Date	Issue Date
Dezarae Wierzba	11/18/2022	11/29/2022