Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
10/16/2026		608-422-6765

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	
Jungle Day Care And Bilingual Preschool Llc		8000588358 / 002 - 2002816	
Address - Facility (Street, City, State, Zip Code) 2521 Allen Blvd Middleton WI 535622211	**Telephone Number** 608-831-0391	**Date - Regulation Visit** 9/29/2026	

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(2)(a)6. **Staff Record - Days & Hours Worked** Description: Staff days and worked hours record was inaccurate when some staff did not sign-in and out, in multiple rooms. El record de las horas y días trabajados de los empleados no estaba concreto cuando varios maestros no anotaron su entrada y salida de los salones. Repeat violation: Previously cited on 3/27/2026	We have an electronic scoreboard. As for the manual report, we will try to review it twice a day, in the morning an the afternoon. to make sure it is correct.	10/13/26	
2	251.06(9)(b)3. **Manual Dishwashing - 3-Step Procedure** The staff did not follow the 3-step procedure when washing dishes manually. According to their description, the procedure was done incorrectly when cups, plates and utensil were left in water with Clorox for a couple of hours. El personal no siguió el procedimiento de 3 pasos al lavar los platos manualmente. Según su descripción, el procedimiento se realizó incorrectamente cuando dejan los vasos, platos y cubiertos en agua con clorox por varias horas.	We will put the procedures on a flyer in every classroom.	10/13/26.	

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NAME - Agency Worker
Luzdarys Marquez

Date Issued
10/2/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
10/7/2026.