

MAR 26 '26

Date Correction Plan Due 4/3/2026	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	DCF - NRO TO FILE A COMPLAINT CALL 715-361-7700
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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.

Name - Certified Operator / Licensed Center Little Sneakers Family Day Care		Provider Number / Facility ID Number 7000559667 / 001 - 1007527		
Address - Facility (Street, City, State, Zip Code) 5535 Riverview Ct Stevens Point WI 544829213		Telephone Number 715-344-1985	Date - Regulation Visit 3/11/2026	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.06(6)(b)1.a. Private Well - Annual Bacteria Test Description: The annual bacteria testing for the private well was not conducted in 2025.	Testing Kit ordered from WEAL on March 11, 2026. Once it is received sample will be drawn and returned to the lab. Results should be returned 2-3 weeks and will be emailed to Heather	4-15-2026	
2	250.06(6)(b)2.a. Private Well - Annual Nitrate Test Description: The annual nitrate testing for the private well was not conducted in 2025.	Testing Kit was ordered on 3-11-26 from WEAL. Once received a sample will be drawn + returned. Results will be emailed to Heather as soon as they are received.	4-15-2026	

NAME - Agency Worker Heather Struck	Date Issued 3/20/2026
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SIGNATURE - Certified Operator or Designee / Licensee or Designee 	Date Signed 3-21-2026
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