BUREAU OF EARLY CARE REGULATION SOUTHEASTERN REGION 141 NW BARSTOW ST ROOM 104 WAUKESHA, WI 53188

Date: 03/05/2021

WILLIAM BUSCH/BARB LACOUR COMMUNITY UNITED METHODIST CHURCH 455 S JEFFERSON ST WATERFORD, WI 53185



State of Wisconsin Provider # 2000577962/001

Facility ID 1005565

Regional Office:

Phone: (262) 446-7800 Fax: (262) 446-7991

Licensing Specialist: Paul Spink

Category: Group

County: Racine County

The State of Wisconsin is an equal opportunity service provider. If you need this material in a different format because of a disability, or if you need this letter translated or explained in your own language, please call the telephone number shown above. These services are free.

LICENSE CONTINUATION REMINDER

Facility Address: THE WAY TO GROW PRESCHOOL

455 S JEFFERSON ST

WATERFORD, WI 53185-4213

A review of your license must be completed every two years. According to our records, this should be completed by 03/31/2021 for the license issued to your facility. To date, we have not received one or more of the following license application materials:

- completed application

- license fee payment

- other fee(s) or forfeiture fee(s)

Because you have not submitted all continuation materials and/or fees at least 30 days prior to the license continuation review date, as required by administrative rule, we have attached a Noncompliance Statement and Correction Plan identifying this violation. Your correction plan should simply state "Submittal of all continuation materials/fees," along with the date of submittal. The Bureau of Early Care Regulation will verify that the violation has been corrected upon receipt of all outstanding materials and/or fees. Note: The Noncompliance Statement and Correction Plan must be posted beside the child care license.

If you wish to continue your license, submit all items requested above no later than the license continuation review date. Failure to submit these materials on or before the license continuation review date will result in late fees of \$5.00 per day, for up to 30 calendar days, being assessed for every day after the deadline that we have not received your full license fee payment. The amount of your late fee is determined based on the postmark on the envelope in which the materials are mailed.

Based on your current capacity of 21, your license fee is \$385.99.

Any forfeiture assessed under s.48.715(3)(a) or penalty under s.48.76 that is due must be paid before a license will be issued or renewed. Payment in the form of a check or money order for all fees due (including any license, late fees or forfeitures) should be made payable to the Department of Children and Families.

Please mail any materials and/or any fees due to:

BUREAU OF EARLY CARE REGULATION SOUTHEASTERN REGION 141 NW BARSTOW ST ROOM 104 WAUKESHA, WI 53188

If you have already mailed the items listed above, please disregard this notice. If you do not wish to continue your license, please respond in writing indicating the date you will close the facility.

Sincerely,

Randall Gasser LICENSING MANAGER BUREAU OF EARLY CARE REGULATION

CCWR-1 Date: 03/05/2021 Page 1

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Date Correction Plan Due

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL 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.

The West To Company of the Company o			der Number / Facility ID Number 577962 / 001 - 1005565	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.11(4)(b) Continuation License - Application Materials Submission	house with staffand new objector, submich License Continuation	3-30-21	3.30-2
	Repeat violation: Previously cited on 3/6/2019	time.	*	

NAME - Certification Worker / Licensing Specialist Paul Spink	Date Issued 3/5/2021
SIGNATURE - Certified Operator or Designee / Licensee or Designee Dennhis Commens Outering duroctor	Date Signed 3:30-74
CF-F-CFS0294 E (R.06/2011)	