

<b>Date Correction Plan Due</b> 5/22/2026	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 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.

<b>Name - Certified Operator / Licensed Center</b> The Train Station		<b>Provider Number / Facility ID Number</b> 4000590044 / 001 - 2005052		
<b>Address - Facility (Street, City, State, Zip Code)</b> 152111 Tulip Ln Wausau WI 544015509		<b>Telephone Number</b> 715-348-2497	<b>Date - Regulation Visit</b> 5/5/2026	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.05(2)(a)3.a. <b>Staff Record - Physical Examination</b>  Description: Staff D did not have a health report on file.  Repeat violation: Previously cited on 9/27/2024	submitted and filed on May 15, 2026.	May 15, 2026	
2	251.05(3)(b) <b>Abusive Head Trauma Prevention Training</b>  Description: Staff H did not have verification of taking abuse head trauma training on file.	training completion date through WI Registry shows 08-10-25 Printed and placed in file.	August 10, 2025	

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3	251.05(3)(cm) <b>Child Abuse &amp; Neglect - Biennial Training</b>  Description: Staff B and Staff H did not have documentation on file of completing child abuse and neglect training.  Repeat violation: Previously cited on 9/27/2024	Training completion date through WI Registry for "H" shows 48-14-25. Employee B will redo training and submit certificate	May 25, 2026	
4	251.05(4)(a) <b>Staff Orientation - Develop, Implement, Document</b>  Description: Staff H did not have completed staff orientation on file.	Employee initialed missing item from orientation held in 2025.	May 22, 2026	

**NAME - Agency Worker**  
Bonnie Davis

**Date Issued**  
5/8/2026

**SIGNATURE - Certified Operator or Designee / Licensee or Designee**

*Wah Schneider*

**Date Signed**

*May 22, 2026*