

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 Child Care Centers Of Marshfield Ii	Facility Address (Street, City, State, Zip Code) 905 Tiny Tigers CT Marshfield, WI 544493069	Telephone Number (715) 389-1721	Facility ID 1011597
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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"/>	Operational requirements Partial Review	<input type="checkbox"/>	Staff
<input checked="" type="checkbox"/>	Physical plant and equipment Partial Review	<input checked="" type="checkbox"/>	Program Partial Review
<input type="checkbox"/>	Transportation	<input type="checkbox"/>	Infant and toddler care
<input checked="" type="checkbox"/>	Care of school-age children Partial Review	<input type="checkbox"/>	Night care

Licensing Specialist Name Kimberly Gachnang	Visit Date 2/28/2022	Issue Date 3/9/2022
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