Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
3/27/2026		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.

Name - Certified Operator / Licensed Center	Provider Number / Facility ID Number
Early Learning Academy	3000563563 / 006 - 2008907

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
3231 S 39Th St Milwaukee WI 532154016	414-645-7001	3/12/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(2)(a)1. **Staff Record - Personal Information** Description: Staff C did not have documentation of a completed staff record form on file.	Staff record was documented for Staff C	3/17/24	
2	251.05(2)(a)4.d. **Staff Record - Educational Qualifications** Description: Staff D and E did not have documentation of a completed Infant Toddler training on file in order to be lead teacher in the infant/toddler room.	phone call to the Registry to see why Intro/Skill classes are not in system. Certifications were added to Staff D & E transcripts to be sent on 3/20/24 to Registry	3/20/24	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number	
Early Learning Academy		3000563563 / 006 - 2008907	
Address - Facility (Street, City, State, Zip Code) 3231 S 39Th St Milwaukee WI 532154016	**Telephone Number** 414-645-7001	**Date - Regulation Visit** 3/12/2026	
Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
3 251.05(4)(a) **Staff Orientation - Develop, Implement, Document** Description: Staff C did not have a completed orientation form on file.	Staff Orientation was complete w/ staff & added in the file	3/17/24	

NAME - Agency Worker
Joel Marquez

Date Issued
3/13/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
3/19/2026