

Date Correction Plan Due 12/16/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 920-785-7811
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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)(l) 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 B-G Club Sch Age - Shapiro		Provider Number / Facility ID Number 9000 59259 / 004 - 420129		
Address - Facility (Street, City, State, Zip Code) 1050 W 18Th Ave Oshkosh WI 549026602		Telephone Number 920-233-1414	Date - Regulation Visit 12/1/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(2)(a)3.a. Staff Record - Physical Examination Description: One staff member, #F, was missing their physical in their file within 30 days of employment - see checklist. Repeat violation: Previously cited on 4/28/2025, 11/12/2024	All staff will have a physical in their file 30 days after employment.	12/19/2025	
2	251.05(2)(a)4.b. Staff Record - Registry Certificate - School Age Programs Description: One staff member, #C, was missing their Registry certificate in their file - see checklist.	All lead staff will have a registry certificate within 6 months of employment.	12/23/2025	

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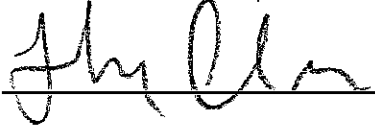
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	<p>251.06(3)(b)2. Emergencies - Practice Written Plans</p> <p>Description: a fire drill was not practiced in September, October or November of 2025.</p> <p>Repeat violation: Previously cited on 4/28/2025</p>	<p>Fire drills will be practiced and documented monthly.</p>	<p>12/19/2025</p>	
4	<p>251.06(3)(b)4. Emergencies - Record Of Fire / Tornado Drills</p> <p>Description: A tornado drill was not practiced in September and October 2025.</p> <p>Repeat violation: Previously cited on 4/28/2025</p>	<p>Tornado drills will be practiced and documented monthly.</p>	<p>12/19/2025</p>	

NAME - Agency Worker
Jill Kellner

Date Issued
12/2/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed



12/9/25