Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
11/4/2025		920-785-7811

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
Kce Champions Llc At Lineville	0000580590 / 099 - 2008460

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
2700 Lineville Rd Green Bay WI 543137151	920-434-6043	6/27/2025

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(2)(m) **Health, Safety & Welfare Of Children** Description: Failed to abide by parents authorizations of field trips and water days when the program took walking field trip to conduct a water days without authorization for 5 childrne in care.	The site team will ensure documents are on file in the future for proper authorizations.	11/30/25	
2	251.04(6)(a)1. **Child Record - Enrollment Information** Description: Based on record review on 6/27/25 according to the Child Record Checklist Child 2 failed to have a Child Enrollment Form on file.	The site team will ensure documents are on file in the future.	11/30/25	

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Address - Facility (Street, City, State, Zip Code) 2700 Lineville Rd Green Bay WI 543137151		**Telephone Number** 920-434-6043	**Date - Regulation Visit** 6/27/2025	
	Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
3	251.04(6)(a)6. **Child Record - Health History** Description: Based on record review on 6/27/25 according to the Child Record Checklist Child 1, 3, 4, 5, 6 failed to have Health History Form on file.	The site team will ensure documents are on file in the future.	11/30/25	
4	251.05(2)(a)1. **Staff Record - Personal Information** Description: Based on record review on 6/27/25 according to the Staff Record Checklist Staff Member A and C failed to have a Staff Record form on file.			
5	251.05(2)(a)3.a. **Staff Record - Physical Examination** Description: Based on record review on 6/27/25 according to the Staff Record Checklist Staff Member A and C failed to have a Health Report on file.			
6	251.05(2)(a)4.b. **Staff Record - Registry Certificate - School Age Programs** Description: Based on record review on 6/27/25 according to the Staff Record Checklist Staff Member A, B and C failed to have a Registry Certificate on file.			

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	Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
7	251.05(2)(a)8. **Staff Record - Orientation** Description: Based on record review on 6/27/25 according to the Staff Record Checklist Staff Member A and C failed to have a orientation on file.	The site team will ensure documents are on file in the future.	11/30/25	
8	251.05(3)(cm) **Child Abuse & Neglect - Biennial Training** Description: Based on record review on 6/27/25 according to the Staff Record Checklist Staff Member A and C failed to have a biennial child abuse and neglect on file.	↓	11/30/25	
9	251.05(3)(e)4.d. **Center Director / Large Center - Entry-Level Training** Description: Based on record review on 6/27/25 according to the Staff Record Checklist Staff Member B failed to have entry level training on file.	↓	11/30/25	
10	251.06(3)(b)1. **Emergencies - Routes And Shelter Areas Posted** Description: Based on record review the program's Emergency plans and drills routes are not posted.	Site team will ensure Emergency Plans & Drill Routes are posted in the future.	11/30/25	

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	Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
11	251.094(4)(b)2. **School-Age Program Leader - High School Or Equivalent** Description: Based on record review on 6/27/25 according to the Staff Record Checklist Staff Member A and C failed to have a a high school diploma on file.	The site team will ensure documents are on file in the future.	11/30/25	
12	251.094(4)(c) **School-Age Program Leader - Training** Description: Based on record review on 6/27/25 according to the Staff Record Checklist Staff Member A, B, and C failed to have a School age education qualifications on file.			

NAME - Agency Worker
Cassandra Debauche

Date Issued
10/21/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Kelley Burnell area manager

Date Signed
11/3/25