| Date Correction Plan Due | NONCOMPLIANCE STATEMENT AND CORRECTION PLAN | TO FILE A COMPLAINT CALL |
|---|---|---|
| 11/4/2026 | | 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 Meadowbrook Elem | 0000580590 / 039 - 1010359 |

| Address - Facility (Street, City, State, Zip Code) | Telephone Number | Date - Regulation Visit |
|---|---|---|
| 720 Hillcrest Hts Green Bay WI 54313 | 920-434-6043 | 10/16/2026 |

| | Rule/Statute Number Noncompliance Statement | Correction Plan | Expected Completion Date | Verification Date |
|---|---|---|---|---|
| 1 | 251.04(2)(L)1.a.<br>**Monitoring Results Posted**<br><br>Description: Based on observation on 10/16/26, the center failed to post the last monitoring results.<br><br>Repeat violation: Previously cited on 2/17/2026 | Center will post monitoring results. | 12/4/26 | |
| 2 | 251.05(2)(a)3.a.<br>**Staff Record - Physical Examination**<br><br>Description: Based on record review on 10/16/26, staff A failed to have a completed physical examination within 30 days of employment.<br><br>Repeat violation: Previously cited on 2/20/2025 | Staff A will add this document to her file. | 12/4/26 | |

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| **Address - Facility (Street, City, State, Zip Code)**<br>720 Hillcrest Hts Green Bay WI 54313 | **Telephone Number**<br>920-434-6043 | **Date - Regulation Visit**<br>10/16/2026 | |

| | Rule/Statute Number<br>Noncompliance Statement | Correction Plan | Expected Completion Date | Verification Date |
|---|---|---|---|---|
| 3 | 251.05(2)(a)4.b.<br>**Staff Record - Registry Certificate - School Age Programs**<br><br>Description: Based on record review on 10/16/26, according to the Staff Record Checklist Staff Member C failed to have a Registry on file.<br><br>Repeat violation: Previously cited on 2/17/2026 | Staff C will have a registry on file. | 12/4/26 | |
| 4 | 251.06(3)(b)2.<br>**Emergencies - Practice Written Plans**<br><br>Description: Based on record review on 10/16/26, the program failed to conduct emergency plans and drills monthly. The program failed to conduct a fire drill in the month of August and September 2026.<br><br>Repeat violation: Previously cited on 2/17/2026 | Emergency plans and drills will be conducted monthly. | 12/4/26 | |
| 5 | 251.06(3)(b)4.<br>**Emergencies - Record Of Fire / Tornado Drills**<br><br>Description: Based on record review on 10/16/26, the program failed to have any documentation of emergency plans and drills that were completed in August and September 2026.<br><br>Repeat violation: Previously cited on 2/17/2026 | Documentation will be completed monthly. | 12/4/26 | |

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| | **Rule/Statute Number**<br>**Noncompliance Statement** | **Correction Plan** | **Expected Completion Date** / **Verification Date** |
| 6 | 251.094(3)(c)4.<br>**School-Age Director - Training**<br><br>Description: Based on record review on 10/16/26 according to the Staff Record Checklist Staff Member C failed to meet the SA director qualifications. The director duties are being performed by Staff Member C. | Staff C will obtain her transcripts, upload to registry, and add copies to her file to prove her Director qualifications. | 12/4/26 |

**NAME** - Agency Worker
Dao Xiong

Date Issued
10/21/2026

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

Date Signed
10/28/26