## **DEPARTMENT OF CHILDREN AND FAMILIES**

Division of Early Care and Education

## **Compliance Statement Licensed Group Child Care Centers**

TO FILE A COMPLAINT, CALL: (920) 785-7811

**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.

**Specialist** 

Instructions - Licensing 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		Facility Address (Street, City, State, Zip Code)		Telephone Number	Facility ID		
Kindercare Learning Ctr - Truman		Kimberly, WI 54136		(920) 687-3111	1010059		
	NO ADMINISTRATIVE C The following checked items indica	CODE VIOLATIONS WERE te the sections and / or partial sec					<del></del>
<	Operational requirements		<	Staff			
~	Physical plant and equipment		>	Program			
V	i nysicai piant and equipment		¥	r rogram			
	Transportation		<	Infant and toddler care	9		
	Care of school-age children			Night care			
Ш	Care of School-age Children		<b>~</b>	Night care			
			•				
Licensing Specialist Name					Visit Date	Issue Date	
Judith Zanon, Gloribel Tegen					3/23/2021	4/14/2021	