

Compliance Statement

Public School Operated Child Care Program

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 public school operated child care program with a summary of the results of the monitoring visit.

Instructions – Licensing Specialist: When no violations are observed during a visit, check the sections and / or partial sections of the administrative code monitored. If you didn't monitor the entire section, you may also reference the specific subsections, paragraphs, or subdivisions completed.

Name – Facility Washington Co. HS-Jackson Area	Address – Facility (Street, City, State, Zip Code) N165 W20330 Hickory Ln., Jackson, WI 53037	Telephone Number 262-577-9665	Facility ID 2005893
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NO ADMINISTRATIVE CODE VIOLATIONS WERE OBSERVED ON THIS MONITORING VISIT.

The following checked items indicate the sections and / or partial sections of the administrative code that were monitored on this visit.

<input checked="" type="checkbox"/> Operational Requirements Reviewed reports, children's records and reporting abuse.	<input checked="" type="checkbox"/> Staff Reviewed staff background checks.
<input type="checkbox"/> Supervision and Grouping	<input checked="" type="checkbox"/> Physical Plant and Equipment Observed building, outdoor space, protective measures and emergency plans.
<input checked="" type="checkbox"/> Program Observed equipment and furnishings and snack. Reviewed health.	<input type="checkbox"/> Transportation
<input checked="" type="checkbox"/> Infant and Toddler Care N/A	<input type="checkbox"/> Care of School Age Children

Licensing Specialist Name Jamie Brandt	Visit Date (mm/dd/yyyy) 1/25/2024	Issued Date (mm/dd/yyyy) 2/02/2024
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