

<b>Date Correction Plan Due</b> 10/21/2025	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 608-422-6765
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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)(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.

<b>Name - Certified Operator / Licensed Center</b> Leap Academy		<b>Provider Number / Facility ID Number</b> 1000 91581 / 001 - 2006780		
<b>Address - Facility (Street, City, State, Zip Code)</b> 290 Corporate Dr Madison WI 537142406		<b>Telephone Number</b> 608-204-5327	<b>Date - Regulation Visit</b> 9/16/2025	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.07(2)(e)1. <b>Prohibited Actions - Corporal Punishment</b>  Description: Based on staff interviews, a staff member engaged in prohibited actions when she grabbed a child forcefully and pulled the child out of a sandbox by the arm.  This incident was self reported by the center. The staff member is no longer employed at the center.  Repeat violation: Previously cited on 11/25/2024	All staff were retrained in appropriate redirection of a child and procedures.  Staff member involved was immediately terminated.	10/1/2025	

**NAME** - Agency Worker  
Casey Allison

Date Issued  
10/7/2025

**SIGNATURE** - Certified Operator or Designee / Licensee or Designee  
DCF-F-CFS0294-E (R.06/2011)

Date Signed