

Certified Operator / Licensed Center		Provider Number / Facility ID Number	
Learning Center		6000591616 / 001 - 2006819	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
4870 N 66Th St Milwaukee WI 532184032		414-439-5226	9/13/2024
	Rule/Statute Number	Correction Plan	Expected Completion Date
	Noncompliance Statement		Verification Date
3	250.05(3)(fm) Biennial Training - Child Abuse & Neglect Description: The most recent Child Abuse & Neglect training completed by the licensee expired on 9/10/24.	DONE !!	

NAME - Agency Worker  
Maureen Slatten

Date Issued  
9/17/2024

SIGNATURE Certified Operator or Designee / Licensee or Designee

Date Signed

*Maureen Slatten*

9/25/2024

**NONCOMPLIANCE STATEMENT AND CORRECTION PLAN**

TO FILE A COMPLAINT CALL  
262-446-7800

Date Correction Plan Due  
9/26/2024

**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

6000591616 / 001 - 2006819

Kitty's Learning Center

Address - Facility (Street, City, State, Zip Code)  
4870 N 66Th St Milwaukee WI 532184032

Telephone Number  
414-439-5226

Date - Regulation Visit  
9/13/2024

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)1.e. Child Record - Enrollment Information - Other Emergency Contact  Description: There is no emergency contact information on file for Child #5 and Child #6.	Mom fixed Contact info Child #5 #6		
2	250.04(6)(a)1.f Child Record - Enrollment Information - Medical Contact  Description: There is no physician information on file for Child #5 and Child #6.	Mom fixed Physician info Child #5 #6		