Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
12/16/2025		715-930-1148

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
Megan's Child Care	8000588608 / 001 - 2002487

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
W7448 170Th Ave Hager City WI 540148014	715-792-2759	6/25/2025

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(b) **Current, Accurate Daily Attendance Record** Description: The attendance was not current and accurate when eight children were observed in care and one was not signed in on the attendance record. The provider immediately signed the child in upon noticing the oversight.	Make sure daily attendance is filled out daily	asap	
2	250.06(2)(k) **Deteriorating Or Toxic Paint** Description: Paint had deteriorated and was peeling on the deck railing that is accessible to children from within the enclosed outdoor play space.	Paint/stain Deck	6/1/26	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date

NAME - Agency Worker
April Callihan

Date Issued
12/2/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Megan Sun

Date Signed
12/3/25