Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
3/20/2026		262-446-7800

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
Devoted Hearts Learning Center	6000593186 / 001 - 2008230

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
3017 N 53Rd St Milwaukee WI 532101618	414-522-6941	3/3/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(b) **Current, Accurate Daily Attendance Record** Description: Children in care were not accurately signed out of center	Ensure each child is signed out promptly after leaving.	3/4/26	
2	250.055(2)(b) **Maximum Number Of Children In Care Of The Provider** Description: Center did not meet child to staff ratio. There were 5 children in care under 2 years of age with one provider	Ensure that I have the correct amount of staff for numbered children.	3/4/26	

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	Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date** / **Verification Date**
3	250.08(5)(c) **Vehicle Liability Insurance** Description: Vehicle insurance was not accurately updated to The Department	sent over valid insurance.	3/31/26

NAME - Agency Worker
Tiarra Trammell

Date Issued
3/13/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Cindi Murphy

Date Signed
3/18/26