

Date Correction Plan Due 4/10/2019	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-930-1148
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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.

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Ahuco Head Start Center		1000556721 / 003 - 520372		
Address - Facility (Street, City, State, Zip Code) 321 Epoch Rd Tomah WI 54660		Telephone Number 608-372-6669	Date - Regulation Visit 3/19/2019	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.06(6)(b)1. Private Well - Annual Lead & Bacteria Test Description: The most recent water test on file was completed 12/13/2017. Water tests must be conducted annually.	<i>The health department is conducting the water test the week of 3/25-29. As soon as the results are in, they will be submitted to the</i>	<i>3/25-29, 2019 As soon results are in.</i>	

Licensors and on file @ the Head Start center.



NAME - Certification Worker / Licensing Specialist Rita Miller	Date Issued 3/27/2019
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SIGNATURE - Certified Operator or Designee / Licensee or Designee <i>Samuel Sachet Mueh</i>	Date Signed 3/28/2019
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