

Date Correction Plan Due 11/1/2021	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 Learning Ladder Family Daycare		Provider Number / Facility ID Number 6000584006 / 001 - 1013570	
Address - Facility (Street, City, State, Zip Code) 8463 State Hwy 173 Tomah WI 54660		Telephone Number 608-374-2242	Date - Regulation Visit 10/14/2021
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	250.04(6)(a)4m. Child Record - Immunization History Compliance Description: An immunization record was not observed in the file for Child #1.	ASK Parent for a copy of Immunization Record. It was just overlooked as to why I didn't have a copy	Completed on 10/15/2021



NAME - Certification Worker / Licensing Specialist Jennifer Stubbe	Date Issued 10/18/2021
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SIGNATURE - Certified Operator or Designee / Licensee or Designee <i>Nancy Stubbé</i>	Date Signed <i>October 17, 2021</i>
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