

Compliance Statement
Licensed Group Child Care Centers

TO FILE A COMPLAINT, CALL: (715) 361-7700

Use of Form Completion of this form meets the requirements of ch. 48, Wis. Stats., and provides the licensee with a summary of the results of the licensing visit.

Instructions - Licensing Specialist When no violations are observed during a visit, check the sections of the administrative code monitored. If you didn't monitor the entire section, you may also reference the specific subsections, paragraphs, and subdivisions that were completed.

Instructions - Licensee Post the Compliance Statement near the license in accordance with s.48.657, Wis. Stats. Please take a few minutes to complete the DCF customer satisfaction survey and tell us about your visit experience. The survey takes approximately 5 minutes to complete. It is voluntary and anonymous, and there is no penalty for not responding. Follow this link to provide your feedback: <https://www.surveymonkey.com/r/LicenseFeedback>. If you don't have Internet access, contact your licensing office for a paper version of the survey.

Facility Name Family Forum Head Start Center 10	Facility Address (Street, City, State, Zip Code) 400 Turner ST Phillips, WI 545551123	Telephone Number (715) 339-4020	Facility ID 1015556
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NO ADMINISTRATIVE CODE VIOLATIONS WERE OBSERVED DURING THIS LICENSING VISIT.

The following checked items indicate the sections and / or partial sections of the administrative code that were monitored on this visit.

<input checked="" type="checkbox"/>	Operational requirements Health and Safety Rules, Terms, Administration, Reports, Children's Records	<input checked="" type="checkbox"/>	Staffing Supervision, Staffing and Grouping
<input checked="" type="checkbox"/>	Physical plant and equipment Physical Plant, Protective Measures, Fire Protection, Sanitation, Outdoor	<input checked="" type="checkbox"/>	Program Child Guidance, Equipment, Rest Period, Meals and Snacks, Health
<input checked="" type="checkbox"/>	Transportation Vehicle Alarm, Tracking, General Transportation	<input checked="" type="checkbox"/>	Infant and toddler care N/A
<input checked="" type="checkbox"/>	Care of school-age children N/A	<input checked="" type="checkbox"/>	Night care N/A

Licensing Specialist Name Kim Pinchard	Visit Date 9/18/2019	Issue Date 9/18/2019
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