

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS
DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: LIFE CHANGERS CHRISTIAN ACADEMY
Type of Facility : Center Day OST Night
Date of Visit: 07/09/2025
Family
University
Group

Facility Address: 1529 TOMAHAWK RD, BIRMINGHAM, AL, 35214, Jefferson
Licensee: LIFE CHANGERS CHRISTIAN CENTER, INC
Telephone #: (205) 798-3334
Ages: 6 Weeks to 18 Years
Director (if applicable): CONNIE M EVANS
Capacity: 90 /NA
Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u>	<u>Date Corrected by Licensee</u>
HAZARDS MUST BE CORRECTED IMMEDIATELY*	

Deficiency Summary

There were no deficiencies that were noted or observed on today's visit. All Health and Safety met as of 7/9/25, Ad Hoc
Comments: NA
Pending Correction

INSTRUCTIONS TO LICENSEE: Column 2, Date Corrected by Licensee, is to be completed by the facility representative after each deficiency is corrected. The

facility representative must put the date of correction and his/her initials in Column 2. This form must be returned to the Department of Human Resources on or before N/A, as verification that deficiencies have been corrected.

NOTICE: Any misleading or any false statements or reports made to the Department and/or failure to correct the listed deficiencies can be the basis for adverse action. None of these requirements are to be interpreted to allow anyone to operate in violation of Performance Standards. A facility licensed by the Department must always meet Performance Standards applicable to that facility. It is the responsibility of the licensee to operate in compliance with Performance Standards.

Conny Ewars 7/9/25
Signature of Facility Representative Date

Catressa Rozell / Catressa Rozell 7/9/25
Signature of DHR Licensing Representative Date

COPIES TO: Director