

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

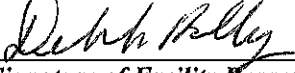
Facility Name: UNIVERSITY DAYCARE	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 7/18/2025
Facility Address: 1006 N. DEAN RD, AUBURN, AL 36830, Lee	Licensee: TERRELL UNIVERSITY DAYCARE, LLC	Telephone #: (334) 203-1234
Ages: 6 Weeks to 12 Years	Director (if applicable): DEBORAH HOLLEY	Capacity: 181 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
The annual visit and renewal visit were completed on the same day July 18, 2025.	
The staff in the older tots room does not have a suitability letter., Ad Hoc Comments: NA	8/6/2025
The staff in the older tots room does not have a Child Abuse and Neglect form., Ad Hoc Comments: NA	8/6/2025
In the older tots room the DHR representative observed one staff without a suitability and Child Abuse and Neglect form on file, with one other staff and 10 toddlers ages 18 month to 2 1/2 years leaving the classroom out of ratio, 1 to 10. , Ad Hoc Comments: NA	7/18/2025

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 8/1/2025, 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.



Signature of Facility Representative

8/6/2025

Date

Leanna Towery

Signature of DHR Licensing Representative

8/6/2025

Date

COPIES TO: director