

**ALABAMA DEPARTMENT OF HUMAN RESOURCES  
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT**

**SECTION A- IDENTIFYING INFORMATION**

Facility Name: HILLWOOD BAPTIST PRESCHOOL	Type of Facility : Center [X] Day [X]            OST [ ] Night [ ]        Family [ ] University [ ] Group [ ]	Date of Visit: 10/21/2025
Facility Address: 300 KOHLER ROAD, HUNTSVILLE, AL 35803, Madison	Licensee: HILLWOOD BAPTIST CHURCH	Telephone #: (256) 883-1586
Ages: 6 Weeks to 12 Years	Director (if applicable): Emily Thompson	Capacity: 129     /    NA Day        Night

**SECTION B - DEFICIENCY INFORMATION**

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
<b>Deficiency Summary</b>	
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: have the wrong suitability letter	
Failed - Health and Safety Training, Staff Checklist Comments: need CCDF # 6,7,8,9,10 &11	
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Comments: expired 7/20/2025	
Failed - Ongoing Training, Staff Checklist Comments: need 12 hours training	
Failed - Health and Safety Training, Staff Checklist Comments: need health and safety training	
Failed - Ongoing Training, Staff Checklist Comments: need 4 hours	

**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 11/04/2025, 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*

LATONYA JAMES

\_\_\_\_\_  
Date

\_\_\_\_\_  
*Signature of DHR Licensing Representative*

\_\_\_\_\_  
Date

COPIES TO: \_\_\_\_\_