ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: SOUTHEAST YMCA PRESCHOOL	Type of Facility : Center [X] Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	Date of Visit: 10/23/2025
Facility Address: 1000 WEATHERLY ROAD, HUNTSVILLE, AL, 35803, Madison	Licensee: THE YOUNG MEN'S CHRIS. ASSOC. MET.HUNTS.	Telephone #: (256) 880-8400
Ages: 0 Weeks to 10 Years	Director (if applicable): ERIN LEDET	Capacity: 91 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary There were no deficiencies cited during today's visit.	

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.

Carla Carter
Signature of Facility Representative

10/23/2025
Date

LATONYA JAMES LaTonya James
Signature of DHR Licensing Representative

Oct. 23, 2025
Date