

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

SECTION A - IDENTIFYING INFORMATION

Facility Name: CARVER ELEMENTARY PRE-K	Type of Facility : Center ☒ Day ☒ OST ☐ Night ☐ Family ☐ University ☐ Group ☐	Date of Visit: 11/12/2025
Facility Address: 3100 MOBILE DRIVE, MONTGOMERY, AL 36108, Montgomery	Licensee: MONTGOMERY COM. ACTION COMM. & CDC, INC.	Telephone #: (334) 415-3843
Ages: 3 Years to 5 Years	Director (if applicable): ASHLEY WILLIAMS	Capacity: 18 / NA Day Night

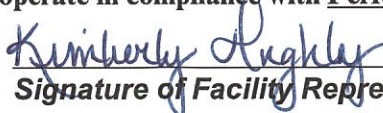
SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
Deficiency Summary	
No deficiencies noted	
Failed - By August 1, 2022, director/all teachers/substitutes/all service staff must be enrolled in the Alabama Pathway's Professional Development Registry, Inspection Form Comments: Some of the staff not registered in the Alabama Pathway's Professional Development Registry.	9/26/2025
Failed - Most recent licensing evaluation, Inspection Form Comments: The most recent licensing evaluation is not posted	9/18/2025
Failed - Most recent deficiency report, Inspection Form Comments: The most recent deficiency report is not posted	9/18/2025
Failed - Most recent Health department inspection report and food permit or written permission for catering food, Inspection Form Comments: The food permit posted expired 9/30/2024	9/18/2025
Failed - Medical, Staff Checklist Comments: no medical report	9/18/2025
Failed - Ongoing Training, Staff Checklist Comments: missing 12 hours of ongoing trainings	9/24/2025
Failed - Medical, Staff Checklist Comments: missing medical report	9/19/2025
Failed - Ongoing Training, Staff Checklist Comments: missing 12 hours of ongoing trainings	9/19/2025
Failed - Health and Safety Training, Staff Checklist Comments: missing	9/19/2025

Failed - Ongoing Training, Staff Checklist	9/19/2025
Comments: missing 12 hours of ongoing trainings	
Failed - Health and Safety Training, Staff Checklist	9/19/2025
Comments: missing	
Failed - Ongoing Training, Staff Checklist	9/18/2025
Comments: missing 12 hours of ongoing trainings	
Failed - Health and Safety Training, Staff Checklist	9/18/2025
Comments: missing	
Failed - Ongoing Training, Staff Checklist	9/18/2025
Comments: missing 12 hours of ongoing trainings	
Failed - Health and Safety Training, Staff Checklist	9/18/2025
Comments: missing	
Failed - Ongoing Training, Staff Checklist	10/1/2025
Comments: missing 12 hours of ongoing trainings	
Failed - Health and Safety Training, Staff Checklist	9/19/2025
Comments: missing	
Failed - Ongoing Training, Staff Checklist	9/26/2025
Comments: missing 12 hours of ongoing trainings	
Failed - Health and Safety Training, Staff Checklist	9/26/2025
Comments: missing	
Failed - Ongoing Training, Staff Checklist	9/23/2025
Comments: missing 12 hours of ongoing trainings	
Failed - Health and Safety Training, Staff Checklist	9/23/2025
Comments: missing	
Failed - Ongoing Training, Staff Checklist	9/24/2025
Comments: missing 12 hours of ongoing trainings	
Failed - Immunization Certificate, Child Checklist	10/1/2025
Comments: unable to read expiration date	
A staff person supervising children without a staff file, Ad Hoc	9/19/2025
Comments: NA	
One child not listed in Arise, Ad Hoc	9/18/2025
Comments: NA	

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 _____, 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


Date

BRIDGETTE SMITH

***Signature of DHR Licensing
Representative***

Date

COPIES TO: _____