

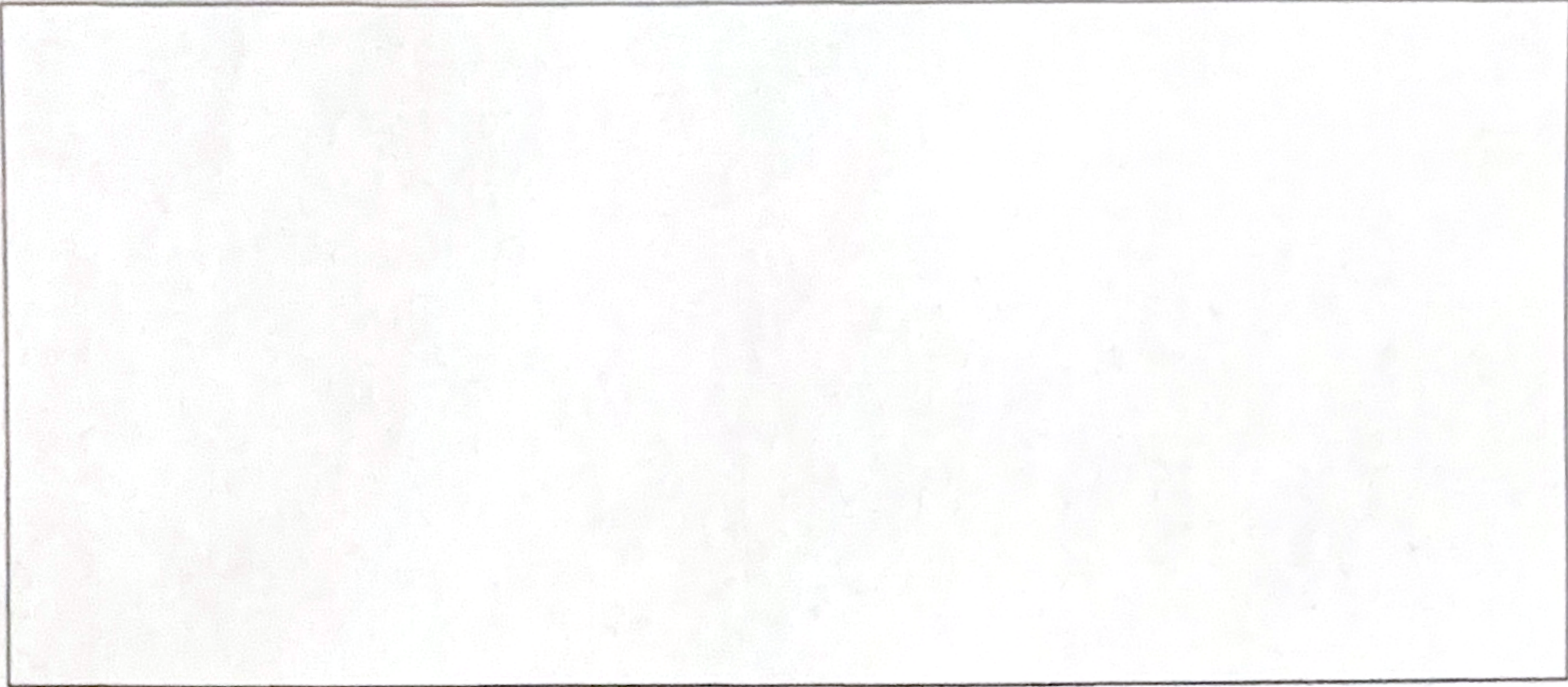
**ALABAMA DEPARTMENT OF HUMAN RESOURCES  
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT**

**SECTION A- IDENTIFYING INFORMATION**

Facility Name: ETERNAL LIFE LEARNING CENTER	Type of Facility : Center [X] Day [X]            OST [ ] Night [ ]           Family [ ] University [ ] Group [ ]	Date of Visit: 11/17/2025
Facility Address: 816 EARLINE STREET, BIRMINGHAM, AL 35215, Jefferson	Licensee: ETERNAL LIFE LEARNING CENTER LLC	Telephone #: (205) 229-8139
Ages: 6 Weeks to 14 Years	Director (if applicable): Kemii McKinstry	Capacity: 134    /    NA Day        Night

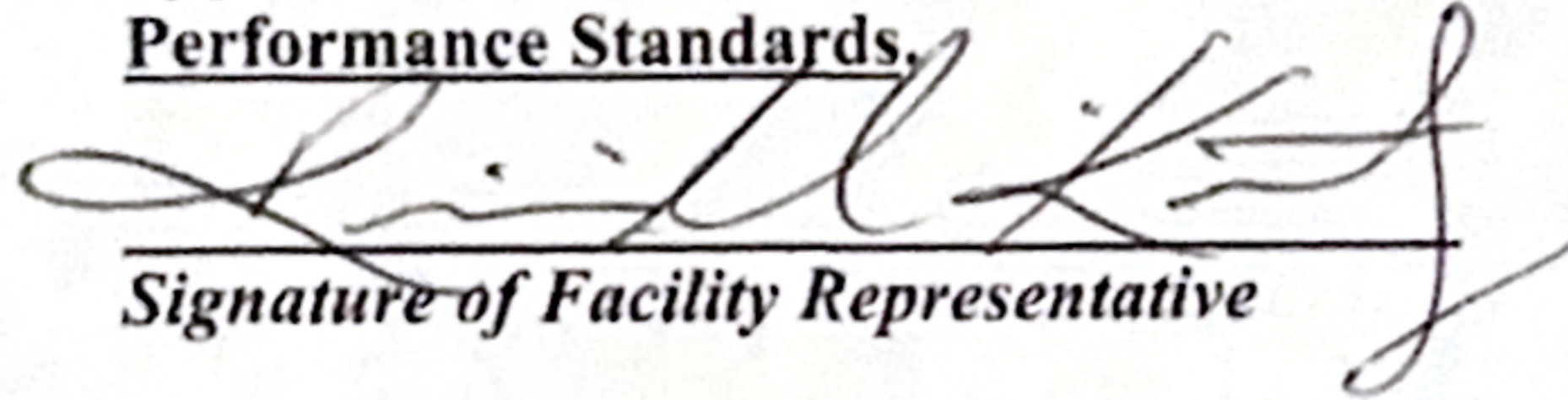
**SECTION B - DEFICIENCY INFORMATION**

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
<b>Deficiency Summary</b>	
CHARACTER AND SUITABILITY, Allegation Comments:	Pending Correction
On 12/12/2025, a staff's file was out of compliance due to an indicated CA/N., Ad Hoc Comments: NA	Pending Correction
On August 15, 2025, it was confirmed by the Office of Criminal History, that one (1) staff's suitability letter was falsified., Ad Hoc Comments: NA	Pending Correction
Upon arrival, there were only two staff to 27 children ages two and one half to five years in the two and one half classroom., Ad Hoc Comments: NA	Pending Correction
On November 17, 2025, seven (7) children ages eighteen (18) months to two and one half (2 1/2) years were left unsupervised for an undetermined amount of time when staff left to let in after school children., Ad Hoc Comments: NA	Pending Correction
On November 17, 2025, two (2) four (4) year old children left the room and wandered into an empty classroom for an undetermined amount of time., 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 12/01/25, 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*

JAIME BOWMAN

11/17/25  
\_\_\_\_\_  
Date

11/17/25

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

\_\_\_\_\_  
Date

COPIES TO: Kemii McKinstry