

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

**SECTION A- IDENTIFYING INFORMATION**

Facility Name: MUSTARD SEEDS ACADEMY	Type of Facility : Center [X] Day [X]      OST [ ] Night [ ]    Family [ ] University [ ] Group [ ]	Date of Visit: 12/2/2025
Facility Address: 4130 RAINBOW DR, RAINBOW CITY, AL 35906, Etowah	Licensee: STEPHANIE GILCHRIST	Telephone #: (256) 413-3302
Ages: 6 Weeks to 12 Years	Director (if applicable): STEPHANIE FOSTER-THORNTON	Capacity: 92      NA Day      Night

**SECTION B - DEFICIENCY INFORMATION**

<u>Performance Standard Deficiency</u> <b>HAZARDS MUST BE CORRECTED IMMEDIATELY*</b>	<u>Date Corrected by Licensee</u>
<b>Deficiency Summary</b> Per staff statements a (4) four-year old male child was able to get out of the building onto the playground where he was unsupervised for approximately (19) nineteen minutes. , 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 12-16-25, 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.

Stephanie Thornton  
Signature of Facility Representative

12.2.25  
Date

Catherine Paulk

Signature of DHR Licensing Representative

12/2/25  
Date

COPIES TO: center