ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: MOUNT VERNON HEADSTART	Type of Facility : Center [X] Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	Date of Visit: 1/16/2026
Facility Address: 1200 PARK STREET, MOUNT VERNON, AL 36560, Mobile	Licensee: MOBILE COMMUNITY ACTION, INC.	Telephone #: (251) 829-6936
Ages: 6 Weeks to 5 Years	Director (if applicable): MARCELLIOUS JONES	Capacity: 88 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary	
Failed - Drinking water without added sweeteners or carbonation readily available throughout the day, Inspection Form Comments: incomplete	Pending Correction
Failed - Center free of apparent hazards, Inspection Form Comments: one dangling cord in the kitchen area (room C)	1/16/2026
Failed - Gates secured, Inspection Form Comments: Two spots at the bottom of the fence (near sheds) large enough for a small animal to climb under	Pending Correction
Failed - References, Staff Checklist Comments: one relative	1/16/2026
Failed - Shelving for equipment and supplies/anchored, Classroom Checklist / Classroom A Comments: Two shelves	1/16/2026

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.

Marcellious Jones

01/16/2026

Signature of Facility Representative Date

BRANDUL PERINE

Signature of DHR Licensing Representative Date

COPIES TO: _____