

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

**SECTION A- IDENTIFYING INFORMATION**

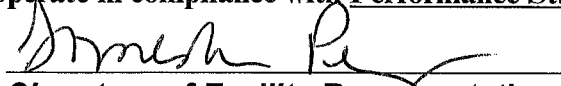
Facility Name: FAITH TABERNACLE ACADEMY	Type of Facility : Center [X] Day [X]      OST [ ] Night [ ]    Family [ ] University [ ] Group [ ]	Date of Visit: 2/12/2026
Facility Address: 3708 SALEM STREET, EIGHT MILE, AL 36612, Mobile	Licensee: FAITH TABERNACLE APOST CHURCH OF GOD	Telephone #: (251) 473-0555
Ages: 6 Weeks to 13 Years	Director (if applicable): TOMESHA PERRY	Capacity: 142    ,    NA Day      Night

**SECTION B - DEFICIENCY INFORMATION**

<u>Performance Standard Deficiency</u> <b>HAZARDS MUST BE CORRECTED IMMEDIATELY*</b>	Date Corrected by Licensee
<b>Deficiency Summary</b>	
Failed - 0 up to 18 months 1 to 5, Inspection Form Comments: Due staff having the incorrect suitability letter	2/12/2026
Staff files are incomplete., Ad Hoc Comments: NA	2/12/2026
There is a person working at the center with access to children without a file. , Ad Hoc Comments: NA	2/12/2026

**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.

  
**Signature of Facility Representative**

2-12-26  
Date

SHUNDR NEVELS

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***Signature of DHR Licensing  
Representative***

Date

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