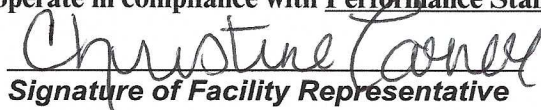


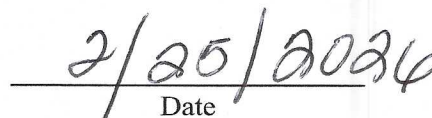
|                                                                                      |                    |
|--------------------------------------------------------------------------------------|--------------------|
| Comments: missing full address                                                       |                    |
| Failed - Preadmission Form, Child Checklist                                          | Pending Correction |
| Comments: missing signature                                                          |                    |
| Failed - Preadmission Form, Child Checklist                                          | Pending Correction |
| Comments: missing full address                                                       |                    |
| Failed - Preadmission Form, Child Checklist                                          | Pending Correction |
| Comments: missing full address                                                       |                    |
| Failed - Preadmission Form, Child Checklist                                          | Pending Correction |
| Comments: missing full address                                                       |                    |
| Failed - Preadmission Form, Child Checklist                                          | Pending Correction |
| Comments: missing information at the top and missing full address                    |                    |
| Failed - Preadmission Form, Child Checklist                                          | Pending Correction |
| Comments: missing full address                                                       |                    |
| Failed - Preadmission Form, Child Checklist                                          | Pending Correction |
| Comments: missing signature                                                          |                    |
| Failed - Hazardous substances locked, Classroom Checklist / Infant 2                 | 2/18/2026          |
| Comments: hazardous substance was not under lock                                     |                    |
| Failed - Electrical outlets covered, Classroom Checklist / After School              | 2/18/2026          |
| Comments: missing outlet cover                                                       |                    |
| On 02-18-26 in infant 1 classroom there was an infant asleep in a highchair., Ad Hoc | 2/18/2026          |
| 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**

SHYNECSA BLEVINS

  
**Date**

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

\_\_\_\_\_  
**Date**

COPIES TO: \_\_\_\_\_