ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name:	Type of Facility : Center [X]	Date of Visit:
LIGHTHOUSE ACADEMY OF EXC. & ACHVMT. III	Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	2/25/2026
Facility Address: 218 SOUTH WILSON AVENUE, PRICHARD, AL 36610, Mobile	Licensee: LIGHTHOUSE CH OF APOSTOLIC FAITH OF AL	Telephone #: (251) 725-0246
Ages: 6 Weeks to 12 Years	Director (if applicable): TEJUANIA NELSON	Capacity: 77 / NA Day Night

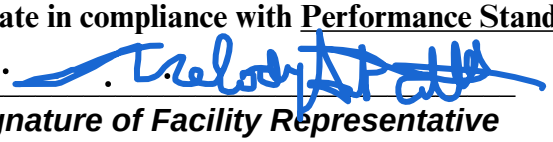
SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary	
Failed - Health and Safety Training, Staff Checklist Comments: Expired	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: Expired	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: Missing 1, 2, 3, 4, 7, 8,9 , and 11	Pending Correction
Failed - Medical, Staff Checklist Comments: Expired	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: Expired	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: Missing 12 hrs	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: Expired	Pending Correction
Failed - Hazardous substances locked, Classroom Checklist / EHS-A Comments: Bleach solution not locked	2/25/2026
Failed - Containers labeled, Classroom Checklist / EHS-A Comments: Bleach solution not labeled	2/25/2026
Failed - Written daily schedule posted with 60-90 minutes of active play, Classroom Checklist / Preschool Comments: Not posted in the classroom	2/25/2026

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 Date

LaDanika York

_____ _____

Signature of DHR Licensing Representative Date

COPIES TO: _____