ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: KIDZ POWER	Type of Facility : Center [X] Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	Date of Visit: 3/19/2026
Facility Address: 3104 SOUTH RAILROAD ST UNIT A, PHENIX CITY, AL, 36867, Russell	Licensee: SHATORI S. THOMAS	Telephone #: (706) 315-7686
Ages: 12 Years	Director (if applicable): CHRISTINE TARVER	Capacity: 18 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	Date Corrected by Licensee
Deficiency Summary	
Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form Comments: rotten board on the building as you walk out the door	Pending Correction
Failed - By August 1, 2022, director/all teachers/substitutes/all service staff must be enrolled in the Alabama Pathway's Professional Development Registry, Inspection Form Comments: some of the facility staff are not enrolled in Alabama Pathway's Registry.	Pending Correction
Failed - Most recent licensing evaluation, Inspection Form Comments: most recent evaluation is not posted	Pending Correction
Failed - Most recent deficiency report, Inspection Form Comments: most recent deficiency report is not posted	Pending Correction
Failed - Menu for meals and snacks/dated, Inspection Form Comments: menu is not posted	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: missing full address and telephone number	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: missing doctor information	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: missing full address at the top of the preadmission	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: missing full address	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: missing full address on the second page of	Pending Correction

preadmission Failed - Preadmission Form, Child Checklist Comments: missing signature on the second page	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 4-2-26 **, 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.

Charlotte Tarpley — 3-19-2026

Signature of Facility Representative — Date

SHYNECSA BLEVINS Shynecsa Blevins 3-19-26

Signature of DHR Licensing Representative — Date

COPIES TO: Director