

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

SECTION A- IDENTIFYING INFORMATION

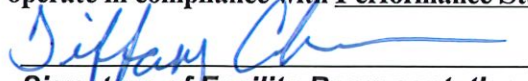
Facility Name: ELYTON HEAD START/ EARLY HS CENTER	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 3/18/2026
Facility Address: 432 CENTER STREET, BIRMINGHAM, AL 35204, Jefferson	Licensee: MISSISSIPPI ACTION FOR PROGRESS, INC	Telephone #: (659) 240-8998
Ages: 2 Years to 5 Years	Director (if applicable): LATORSHA GOWDY	Capacity: 61 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
Failed - Ongoing Training, Staff Checklist	3/30/2026
Comments: Missing 11 hrs	
Failed - Hazardous substances locked, Classroom Checklist / 5130B	3/18/2026
Comments: Lotion not under lock and key/ combination lock	

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

SHUNDR NEVELS

4-27-26

Date

Signature of DHR Licensing

Date

Representative

COPIES TO: _____