

Plan of Correction

SECTION A - IDENTIFYING INFORMATION

Facility Name: COMMUNITY NURSERY & PRESCHOOL SITE II	Type of Facility: Center <input checked="" type="checkbox"/> OST <input type="checkbox"/> Day <input checked="" type="checkbox"/> Family <input type="checkbox"/> University <input type="checkbox"/> Night <input checked="" type="checkbox"/> Group <input type="checkbox"/>
Physical Address: 3055 SPRINGHILL AVE MOBILE, AL 36607	Mailing Address: P.O. BOX 16335 MOBILE, AL, 36616
Telephone Number: (251) 450-2300	Licensee: COMMUNITY CHURCH MINISTRIES PRESCHOOL
Capacity: 150	Director: ANTIONETTE COKER
Age Range: 6 Weeks to 12 Years 6 Weeks to 12 Years	Date Prepared: 5/13/2026

SECTION B - BASIS FOR PLAN OF CORRECTION

List each deficiency, the plan of action, and the target date for each item:

Deficiency Plan of Correction	Date to be completed
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Plan of Action - WAITING ON CA/N DEPT	6/1/2026
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Plan of Action - WAITING ON CA/N DEPT	6/1/2026