

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: SMART START LEARNING CENTER	Type of Facility : Center [X] Day [X] OST [] Night [X] Family [] University [] Group []	Date of Visit: 6/12/2026
Facility Address: 655 HEADLAND AVENUE, DOTHAN, AL 36303, Houston	Licensee: SMART START LEARNING CENTER, LLC	Telephone #: (334) 699-0901
Ages: 6 Weeks to 14 Years/6 Weeks to 14 Years	Director (if applicable): NATASHA SCOTT	Capacity: 90 / 16 Day Night

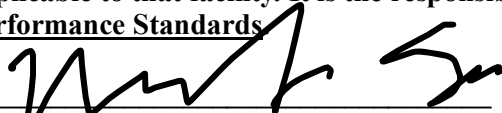
SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
Deficiency Summary	
The infant class was not in attendance due to staff having a conflict.	
Failed - Center free of apparent hazards, Inspection Form Comments: The handicap rail in the back school age bathroom is not attached to the wall.	6/12/2026
Failed - Preadmission Form, Child Checklist Comments: There are blanks on the preadmission record and no address in the release and emergency section	6/12/2026
Failed - Preadmission Form, Child Checklist Comments: The address does not have the city in the emergency or release section.	6/12/2026
Failed - Preadmission Form, Child Checklist Comments: There is not a city listed in any of the address listed and there is no Dr. address or phone number.	6/12/2026
Failed - Preadmission Form, Child Checklist Comments: There is not a city listed in the address section of the emergency or release section.	6/12/2026

Failed - Preadmission Form, Child Checklist Comments: There is no city listed in the address sections.	6/12/2026
Failed - Preadmission Form, Child Checklist Comments: There are blanks and the city is not listed in the address.	6/12/2026
Failed - Preadmission Form, Child Checklist Comments: There are blanks and the city is not listed in the address sections.	6/12/2026
Failed - Preadmission Form, Child Checklist Comments: There are blanks on the form, and the address is not listed in the address section.	6/12/2026
Failed - Immunization Certificate, Child Checklist Comments: expired	6/12/2026
Failed - Immunization Certificate, Child Checklist Comments: expired.	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 June 26, 2026, 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

JAY DALTON

Signature of DHR Licensing Representative



Date

6/12/2026

Date

COPIES TO: Natasha Scott