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:
TRUE LIGHT COMMUNITY CHURCH DAYCARE	Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	7/29/2026
Facility Address: 900 MAIN AVENUE, SYLACAUGA, AL 35150, Talladega	Licensee: TRUE LIGHT COMMUNITY CHURCH DAYCARE	Telephone #: (256) 249-3444
Ages: 6 Weeks to 12 Years	Director (if applicable):	Capacity: 29 , NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary	
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 staff not enrolled in Alabama Pathway's Professional Development Registry	7/29/2026
Failed - Ongoing Training, Staff Checklist Comments: missing	7/29/2026
Failed - Health and Safety Training, Staff Checklist Comments: missing	7/29/2026
Failed - Preadmission Form, Child Checklist Comments: Missing parent signatures on page 2	7/29/2026
On July 29, 2026, upon arrival of DHR representative, the Preschool/School classroom was unsupervised. 8 sleeping children and no staff present, Ad Hoc Comments: NA	Pending Correction
On July 29, 2026, upon arrival of DHR representative, the Toddler classroom was unsupervised. 7 sleeping children and no staff present, Ad Hoc Comments: NA	Pending Correction
On July 29, 2026, upon arrival of DHR representative, the Infant classroom (6 weeks - 24 months) was unsupervised. 7 sleeping children and no staff present, Ad Hoc Comments: NA	Pending Correction
On July 29, 2026, in the 6 weeks - 24 months room, an infant was	Pending Correction

asleep in a swing, Ad Hoc
Comments: NA

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 8/12/26 **, 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.

Stephanie Robinson — 7-29-2026

Signature of Facility Representative — Date

BRIDGETTE ~~SMITH~~ — 7-29-2026

Signature of DHR Licensing Representative — Date

COPIES TO: Director