

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

SECTION A - IDENTIFYING INFORMATION

Facility Name: ANGEL FACES PRESCHOOL		Type of Facility : Center [X] Day [X] Night [] Family [] University [] Group []	
Facility Address: 2101 BIRMINGHAM AVENUE, JASPER, AL 35501, Walker		Licensee: SANDRA GARRISON	
Ages: 0 Weeks to 11 Years		Director (if applicable): SANDRA GARRISON	
Telephone #: (205) 295-2273		Capacity: 90 / NA Day / Night	

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency HAZARDS MUST BE CORRECTED IMMEDIATELY*		Date Corrected by Licensee
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Deficiency Summary CHILD ABUSE AND NEGLECT, Allegation Pending Correction	
Comments: On 05/13/26, per staff statement on or before 05/07/26, a staff was witnessed using inappropriate discipline in handling a child in the Toddler Classroom, Ad Hoc Comments: NA	On 05/13/26, per staff statement on or before 05/07/26, a staff was witnessed using rough and harsh handling of a child in the Toddler Classroom, Ad Hoc Comments: NA
According to staff statement, the facility failed to comply with their operating policies in reference to discipline children, Ad Hoc Comments: NA	Per staff statement on 05/13/26, the facility is telling staff to make false statements to the Department, 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 _____, 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

7/31/2026
Date

SHUNDR NEVELS

Date _____

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