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:
CHASE LEARNING CENTER & DAYCARE, INC.	Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	7/29/2026
Facility Address:	Licensee:	Telephone #:
330 CANYON PARK DRIVE, PELHAM, AL 35124, Shelby	CHASE LEARNING CENTER & DAYCARE, INC.	(205) 620-1616
Ages:	Director (if applicable):	Capacity:
6 Weeks to 12 Years	LORRIE P'POOL	146 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary ALL DEFICIENCIES CORRECTED THROUGH ARISE ON 08/03/2026.	
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 of the facility staff are not registered in Alabama Pathways Registry.	8/3/2026
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: Expired	8/3/2026

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 _____N/A_____, 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.

Lorrie P'Pool — **8/03/2026**

Signature of Facility Representative — Date

AMY HORN — **8/03/2026**

Signature of DHR Licensing Representative — Date

COPIES TO: _____