

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: UNIVERSITY DAYCARE	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 9/10/2026
Facility Address: 1006 N. DEAN RD, AUBURN, AL 36830, Lee	Licensee: TERRELL UNIVERSITY DAYCARE, LLC	Telephone #: (334) 203-1234
Ages: 6 Weeks to 12 Years	Director (if applicable): DEBORAH HOLLEY	Capacity: 186 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
Failed - Center free of apparent hazards, Inspection Form Comments: Broken sink in infant room 2	Pending Correction
Failed - Clear glass doors are marked at child level, Inspection Form Comments: clear glass not marked at child level	9/10/2026
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: has expired	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: missing full address	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: missing address	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: missing signature	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: missing signature	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: missing address an telephone number	Pending Correction
Failed - Shelving for equipment and supplies/anchored, Classroom Checklist / pre one Comments: shelving not anchored	Pending Correction
Failed - Shelving for equipment and supplies/anchored, Classroom Checklist / Pre two A Comments: shelving anchored	Pending Correction
Failed - Shelving for equipment and supplies/anchored, Classroom	Pending Correction

Checklist / Pre two B

Comments: shelving not anchored

On 9/10/26 in pre-one classroom there were peeling paint., Ad Hoc Pending Correction

Comments: NA

On 9/10/26 in pre-one classroom there were broken sink faucet., Pending Correction

Ad Hoc

Comments: NA

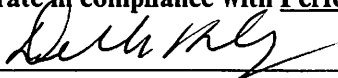
On 9/10/26 in pre-two classroom there were peeling paint., Ad Hoc Pending Correction

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

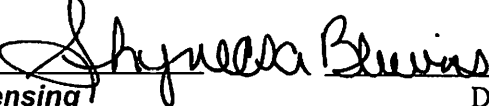
9-24-26, as verification that deficiencies have been corrected.

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.


Signature of Facility Representative

9-10-2026
Date

SHYNECSA BLEVINS


Signature of DHR Licensing Representative

9-10-26
Date

COPIES TO: Director