Comments: missing Failed - Preadmission Form, Child Checklist Comments: Incomplete Preadmission form	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Incomplete Preadmission form	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Incomplete Preadmission form	Pending Correction
Failed - Immunization Certificate, Child Checklist Comments: expired 4/24/26	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Incomplete Preadmission form	Pending Correction
Failed - Immunization Certificate, Child Checklist Comments: expired 4/22/2026	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Incomplete Preadmission form	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Incomplete Preadmission form	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Incomplete Preadmission form	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Incomplete Preadmission form	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Incomplete Preadmission form	Pending Correction
On September 17, 2026, 10 children files not entered into Arise, Ad Hoc Comments: NA	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 _____, 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.

_____ 10-7-2026

Signature of Facility Representative Date

BRIDGETTE SMITH

_____ _____

Signature of DHR Licensing Representative Date

COPIES TO: _____