

Plan of Correction

SECTION A - IDENTIFYING INFORMATION

SECTION 1 - IDENTIFYING INFORMATION	
Facility Name: ANGEL FACES PRESCHOOL	Type of Facility: Center ☒ OST ☐ Day ☒ Family ☐ University ☐ Night ☐ Group ☐
Physical Address: 2101 BIRMINGHAM AVENUE JASPER, AL 35501	Mailing Address:
Telephone Number: (205) 295-2273	Licensee: SANDRA GARRISON
Capacity: 90	Director: SANDRA GARRISON
Age Range: 0 Weeks to 11 Years	Date Prepared: 9/29/2026

SECTION B - BASIS FOR PLAN OF CORRECTION

List each deficiency, the plan of action, and the target date for each item:

Deficiency Plan of Correction	Date to be completed
One staff member CAN has expired, Ad Hoc Plan of Action - CAN has not arrived going to resend paperwork	8/18/2026
Upon arrival on 08/18/2026, one staff member's CAN has expired. , Ad Hoc Plan of Action - CAN has been mailed off, waiting on it to return	9/29/2026