

CORRECTIVE ACTION PLAN
Michigan Department of Licensing and Regulatory Affairs
Bureau of Community and Health Systems

License/Registration Number:	Facility Name:	Date of Violations
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Violated Rule	How Compliance Will Be Achieved, Monitored and Maintained	Timeframe

Registrant/Licensee/Designee/Program Director NameRegistrant/Licensee/Designee/Program Director SignatureDate



LARA is an equal opportunity employer/program.