

Wisconsin Child Care Regulatory System

ROCK County LICENSED Child Care Directory as of 10/4/20

| | | | | | |
|------------------------|---|------------------------|-------------------------|--------------------------|------------------------------------|
| Facility Name | BEAR FAMILY CHILD CARE | Contact | HOLLAND, LOUISE | Full Time | Y |
| Address | 5362 N Newville Rd Milton, Wi 53563 | Phone # | 608-757-1648 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 02/11/2001 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1001826 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 4000570564 | Hours | 05:30 AM-05:30 PM | Star Level | Not Rated |
| | | Location Number | 001 | | |
| Facility Name | BRIGHT BEGINNINGS LEARNING CENTER | Contact | HEEREN, PEGGY M | Full Time | Y |
| Address | 3743 Sandhill Dr Janesville, Wi 53546-3479 | Phone # | 608-558-9227 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 09/20/2010 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1015619 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 4000585524 | Hours | 06:00 AM-04:30 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | BRIGHT HORIZONS FAMILY CHILD CARE | Contact | LOCK, DAWN | Full Time | Y |
| Address | 28 S John Paul Rd Milton, Wi 53563 | Phone # | 608-868-5223 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 12/26/2003 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1005951 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000576450 | Hours | 05:30 AM-05:30 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | BUILDING BLOCKS DAYCARE | Contact | FUERSTENBERG, KRISTINA | Full Time | Y |
| Address | 4927 N Old Orchard Dr Janesville, Wi 53546 | Phone # | 608-756-5484 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 09/15/2005 | From Age | 0 Year(s), 2 Month(s), 0 Week(s) |
| Facility ID | 1009791 | Months | Jan-Dec | To Age | 10 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000568286 | Hours | 06:00 AM-06:00 PM | Star Level | Not Rated |
| | | Location Number | 002 | | |
| Facility Name | CARE A LOT FAMILY DAY CARE | Contact | CHRISTIANSON, ELIZABETH | Full Time | Y |
| Address | 956 Newman St Janesville, Wi 53545 | Phone # | 608-754-1997 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 12/29/1996 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 130170 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000555632 | Hours | 06:00 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |

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|------------------------|--|------------------------|-------------------|--------------------------|------------------------------------|
| Facility Name | CONNIE'S HOME DAY CARE | Contact | KING, CONNIE | Full Time | Y |
| Address | 3640 Braemore Dr Janesville, Wi 53548 | Phone # | 608-752-6198 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 01/30/2000 | From Age | 0 Year(s), 0 Month(s), 1 Week(s) |
| Facility ID | 1002160 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000568349 | Hours | 05:30 AM-05:30 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | HAPPY TIMES DAYCARE | Contact | HOUSER, HOLLY | Full Time | Y |
| Address | 667 Rivendell Dr Milton, Wi 53563 | Phone # | 608-868-7984 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 11/30/2009 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1014831 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000585160 | Hours | 06:30 AM-05:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | HEY DIDDLE DIDDLE DAY CARE | Contact | RANSOM, STACY | Full Time | Y |
| Address | 3711 Teal Ln Janesville, Wi 53546 | Phone # | 608-290-3843 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 02/23/2004 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1007477 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000577156 | Hours | 07:00 AM-05:30 PM | Star Level | 4 Stars |
| | | Location Number | 001 | | |
| Facility Name | HUGGABLE LOVEABLE FAMILY DAY CARE | Contact | HANKINS, VICKI | Full Time | Y |
| Address | 1331 Frederick Beloit, Wi 53511-4022 | Phone # | 608-362-8997 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 01/05/1997 | From Age | 0 Year(s), 0 Month(s), 4 Week(s) |
| Facility ID | 131126 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 8000555708 | Hours | 08:00 AM-11:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | JULIE'S CHILDCARE EXPRESS | Contact | GALLAGHER, JULIE | Full Time | Y |
| Address | 1850 Cleveland St Beloit, Wi 53511-2848 | Phone # | 608-207-0369 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 08/20/2007 | From Age | 0 Year(s), 0 Month(s), 4 Week(s) |
| Facility ID | 1012196 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 1000582741 | Hours | 05:30 AM-05:30 PM | Star Level | 3 Star |
| | | Location Number | 001 | | |

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|------------------------|---|------------------------|--------------------|--------------------------|------------------------------------|
| Facility Name | KATHY'S DAY CARE | Contact | DAVIS, KATHY | Full Time | Y |
| Address | 923 Dean St Edgerton, Wi 53534 | Phone # | 608-751-2699 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 03/13/1997 | From Age | 0 Year(s), 0 Month(s), 4 Week(s) |
| Facility ID | 130609 | Months | Jan-Dec | To Age | 7 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 7000555727 | Hours | 06:00 AM-04:45 PM | Star Level | Not Rated |
| | | Location Number | 001 | | |
| Facility Name | LITTLE PEAS AND PODS | Contact | DUNN, RACHAEL | Full Time | Y |
| Address | 304 Mill St Clinton, Wi 53525-9480 | Phone # | 262-348-8997 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 05/01/2017 | From Age | 0 Year(s), 0 Month(s), 4 Week(s) |
| Facility ID | 2003369 | Months | Jan-Dec | To Age | 7 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000589086 | Hours | 05:00 AM-06:00 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | LORI'S DAY CARE | Contact | LONG, LORI | Full Time | Y |
| Address | 1544 S Grant Ave Janesville, Wi 53546 | Phone # | 608-757-0372 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 03/13/1997 | From Age | 0 Year(s), 0 Month(s), 8 Week(s) |
| Facility ID | 131154 | Months | Jan-Dec | To Age | 9 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000555739 | Hours | 07:00 AM-04:30 PM | Star Level | 3 Star |
| | | Location Number | 001 | | |
| Facility Name | LOTS OF TOTS FAMILY DAY CARE | Contact | OLDENBURG, LORI | Full Time | Y |
| Address | 11403 Mcmillin Rd Whitewater, Wi 53190 | Phone # | 262-473-8718 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 05/23/1997 | From Age | 0 Year(s), 0 Month(s), 1 Week(s) |
| Facility ID | 1002666 | Months | Jan-Dec | To Age | 10 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 7000556957 | Hours | 07:00 AM-05:00 PM | Star Level | Not Rated |
| | | Location Number | 001 | | |
| Facility Name | MAMA MANDIES CHILD CARE | Contact | CHENTNIK, AMANDA N | Full Time | Y |
| Address | 447 N Terrace St Janesville, Wi 53548-3656 | Phone # | 608-352-7429 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 09/19/2016 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2003024 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000588616 | Hours | 05:30 AM-09:30 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |

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| Facility Name | MICHELLES FAMILY DAYCARE | Contact | JANES, MICHELLE | Full Time | Y |
| Address | 8106 N Cemetery Rd Evansville, Wi 53536 | Phone # | 608-490-1174 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 07/15/2000 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1002693 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 8000578198 | Hours | 06:00 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | MISS RUDIES FAMILY DAY CARE | Contact | FOX, RUTH ANN | Full Time | Y |
| Address | 16011 W Stewart Rd Brooklyn, Wi 53521-9676 | Phone # | 608-455-2177 | LICENSED Capacity | 6 |
| Category | LICENSED FAMILY | LICENSED Date | 10/11/1999 | From Age | 0 Year(s), 4 Month(s), 0 Week(s) |
| Facility ID | 132003 | Months | Jan-Dec | To Age | 10 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000567572 | Hours | 06:00 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | NANCY'S HOME DAY CARE | Contact | LARSON, NANCY | Full Time | Y |
| Address | 1332 S Chatham St Janesville, Wi 53546 | Phone # | 608-756-2464 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 03/13/1997 | From Age | 0 Year(s), 0 Month(s), 4 Week(s) |
| Facility ID | 131589 | Months | Jan-Dec | To Age | 15 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 8000555748 | Hours | 05:30 AM-05:30 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | NATURESENSE | Contact | HANSEN, CATHERINE | Full Time | Y |
| Address | 612 Doty St Edgerton, Wi 53534-1519 | Phone # | 608-352-5349 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 04/28/2014 | From Age | 0 Year(s), 2 Month(s), 0 Week(s) |
| Facility ID | 2001784 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 5000588155 | Hours | 07:00 AM- | Star Level | 5 Stars |
| | | Location Number | 001 | | |
| Facility Name | ONE 2 3 YOU AND ME | Contact | HANNA, JAN LYNETTE | Full Time | Y |
| Address | 731 W Grand Ave Beloit, Wi 53511 | Phone # | 608-365-6241 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 04/28/2006 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1010522 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 4000571014 | Hours | 07:00 AM-11:00 PM | Star Level | 2 Stars |
| | | Location Number | 003 | | |

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|------------------------|--|------------------------|--------------------|--------------------------|------------------------------------|
| Facility Name | PEGGY'S PUMPKIN PATCH DAYCARE | Contact | CLOTHIER, MARGARET | Full Time | Y |
| Address | 7664 Terwilliger Rd Clinton, Wi 53525 | Phone # | 608-676-4190 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 03/12/1997 | From Age | 0 Year(s), 0 Month(s), 2 Week(s) |
| Facility ID | 130052 | Months | Jan-Dec | To Age | 13 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555700 | Hours | 07:00 AM-07:00 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | PRAIRIE HOME FAMILY CARE | Contact | WORCHEK, LAURA M | Full Time | Y |
| Address | 3238 Westminster Rd Janesville, Wi 53546-9649 | Phone # | 608-754-3211 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 01/16/2017 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2003142 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000587553 | Hours | 06:00 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | THE DUTTER HOUSE INC | Contact | DUTTER, ROSEMARY | Full Time | Y |
| Address | 1981 Luety Pkwy Beloit, Wi 53511-3827 | Phone # | 608-289-7566 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 08/08/2011 | From Age | 2 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1016032 | Months | Jan-Dec | To Age | 17 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 7000586207 | Hours | -11:59 PM | Star Level | Not Rated |
| | | Location Number | 001 | | |
| Facility Name | TREEHOUSE LEARN AND PLAY CENTER LL | Contact | DOERFER, CHERYL M | Full Time | Y |
| Address | 204 W Main St Evansville, Wi 53536-1019 | Phone # | 608-215-7164 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 03/26/2018 | From Age | 0 Year(s), 0 Month(s), 1 Week(s) |
| Facility ID | 2003893 | Months | Jan-Dec | To Age | 5 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000589440 | Hours | 07:00 AM-05:00 PM | Star Level | Not Rated |
| | | Location Number | 001 | | |
| Facility Name | ZASTY'S FAMILY CHILD CARE | Contact | ZASTOUPIL, LEAH | Full Time | Y |
| Address | 731 Rivendell Milton, Wi 53563-1027 | Phone # | 608-868-6240 | LICENSED Capacity | 8 |
| Category | LICENSED FAMILY | LICENSED Date | 08/05/2005 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1009327 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000579792 | Hours | 06:00 AM-06:00 PM | Star Level | 5 Stars |
| | | Location Number | 001 | | |

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|------------------------|---|------------------------|-------------------|--------------------------|------------------------------------|
| Facility Name | BELOIT BOYS AND GIRLS CLUBS | Contact | PETERSON, EMILY | Full Time | - |
| Address | 1851 Moore St Beloit, Wi 53511-2866 | Phone # | 608-365-8874 | LICENSED Capacity | 110 |
| Category | LICENSED GROUP | LICENSED Date | 05/13/2019 | From Age | 6 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2004384 | Months | Jun-Aug | To Age | 17 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000589766 | Hours | 07:30 AM-06:30 PM | Star Level | 3 Stars |
| Facility Name | BELOIT BOYS AND GIRLS CLUBS | Contact | PETERSON, EMILY | Full Time | - |
| Address | 1851 Moore St Beloit, Wi 53511-2866 | Phone # | 608-365-8874 | LICENSED Capacity | 110 |
| Category | LICENSED GROUP | LICENSED Date | 05/13/2019 | From Age | 6 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2004384 | Months | Sep-May | To Age | 17 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000589766 | Hours | 07:30 AM-06:30 PM | Star Level | 3 Stars |
| Location Number | 001 | Location Number | 001 | | |
| Facility Name | BELOIT CHILD AND FAMILY CENTER | Contact | MISHLER, CAROL | Full Time | Y |
| Address | 1221 Henry Ave Beloit, Wi 53511 | Phone # | 608-299-1500 | LICENSED Capacity | 144 |
| Category | LICENSED GROUP | LICENSED Date | 09/14/2004 | From Age | 0 Year(s), 0 Month(s), 2 Week(s) |
| Facility ID | 1008315 | Months | Aug-Jul | To Age | 5 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000577842 | Hours | 07:00 AM-05:00 PM | Star Level | 5 Stars |
| Location Number | 005 | Location Number | 005 | | |
| Facility Name | BOYS AND GIRLS CLUB OF JANESVILLE | Contact | HATHORN, KAITLYN | Full Time | Y |
| Address | 200 W Court St Janesville, Wi 53548-3886 | Phone # | 608-755-0575 | LICENSED Capacity | 100 |
| Category | LICENSED GROUP | LICENSED Date | 06/12/2019 | From Age | 6 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1007692 | Months | Jun-Aug | To Age | 17 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000589786 | Hours | 07:00 AM-07:00 PM | Star Level | 3 Stars |
| Location Number | 001 | Location Number | 001 | | |
| Facility Name | BOYS AND GIRLS CLUB OF JANESVILLE | Contact | HATHORN, KAITLYN | Full Time | Y |
| Address | 200 W Court St Janesville, Wi 53548-3886 | Phone # | 608-755-0575 | LICENSED Capacity | 100 |
| Category | LICENSED GROUP | LICENSED Date | 06/12/2019 | From Age | 6 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1007692 | Months | Sep-May | To Age | 17 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000589786 | Hours | 03:00 PM-07:00 PM | Star Level | 3 Stars |
| Location Number | 001 | Location Number | 001 | | |

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|------------------------|--|------------------------|-------------------|--------------------------|------------------------------------|
| Facility Name | BOYS AND GIRLS CLUB OF JANESVILLE - JA | Contact | HATHORN, KAITLYN | Full Time | - |
| Address | 441 W Burbank Ave Janesville, Wi 53546-3243 | Phone # | 608-755-0575 | LICENSED Capacity | 40 |
| Category | LICENSED GROUP | LICENSED Date | 01/17/2020 | From Age | 7 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2004874 | Months | Jan-Dec | To Age | 17 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000589786 | Hours | 03:00 PM-05:30 PM | Star Level | 2 Stars |
| | | Location Number | 002 | | |
| Facility Name | BRIGHT START CHILD CARE CENTER | Contact | MARKEE, CONNIE | Full Time | Y |
| Address | 724 Dodge St Orfordville, Wi 53576 | Phone # | 608-879-2711 | LICENSED Capacity | 32 |
| Category | LICENSED GROUP | LICENSED Date | 10/10/2003 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1007148 | Months | Jan-Dec | To Age | 7 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 8000576438 | Hours | 06:30 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | BUTTERFLY GARDENS PRESCHOOL AND N | Contact | GORMAN, AMY | Full Time | Y |
| Address | 92 E State Road 59 Edgerton, Wi 53534-9142 | Phone # | 608-561-6371 | LICENSED Capacity | 49 |
| Category | LICENSED GROUP | LICENSED Date | 09/03/2019 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 2004723 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 1000589871 | Hours | 05:00 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | CARGILL CHRISTIAN PRESCHOOL AND D C | Contact | ALLEN, DAWN | Full Time | Y |
| Address | 2000 Wesley Ave Janesville, Wi 53545 | Phone # | 608-752-2140 | LICENSED Capacity | 135 |
| Category | LICENSED GROUP | LICENSED Date | 12/29/1996 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 120266 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 1000555561 | Hours | 06:00 AM-06:00 PM | Star Level | 5 Stars |
| | | Location Number | 001 | | |
| Facility Name | CENTRAL LUTHERAN PRESCHOOL AND 4K | Contact | GRABOW, BARBARA | Full Time | - |
| Address | 100 W Rollin St Edgerton, Wi 53534 | Phone # | 608-884-9418 | LICENSED Capacity | 38 |
| Category | LICENSED GROUP | LICENSED Date | 02/01/1997 | From Age | 3 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120095 | Months | Sep-May | To Age | 5 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 1000577971 | Hours | 07:30 AM- | Star Level | Not Rated |
| | | Location Number | 001 | | |

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|------------------------|--|------------------------|------------------------|--------------------------|------------------------------------|
| Facility Name | CHILD'S FIRST INC | Contact | BENNETT, MAL | Full Time | Y |
| Address | 612 N Randall Ave Janesville, Wi 53545-1958 | Phone # | 608-752-0743 | LICENSED Capacity | 75 |
| Category | LICENSED GROUP | LICENSED Date | 01/03/2017 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 2003226 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000589053 | Hours | 06:00 AM-06:00 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | COLOR MY WORLD CHILDCARE CENTER LL | Contact | CAVALETTO, STEPHANIE L | Full Time | Y |
| Address | 2445 S Park Ave Beloit, Wi 53511-2443 | Phone # | 608-207-3543 | LICENSED Capacity | 34 |
| Category | LICENSED GROUP | LICENSED Date | 11/01/2017 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2003737 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 1000589321 | Hours | 05:00 AM-05:30 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | COMMUNITY KIDS BELOIT | Contact | OESTREICH, KAYLA | Full Time | Y |
| Address | 1221 Henry Ave Beloit, Wi 53511-3636 | Phone # | 608-755-2488 | LICENSED Capacity | 16 |
| Category | LICENSED GROUP | LICENSED Date | 09/13/2004 | From Age | 0 Year(s), 0 Month(s), 2 Week(s) |
| Facility ID | 1008334 | Months | Jan-Dec | To Age | 3 Year(s), 7 Month(s), 0 Week(s) |
| Provider Number | 6000555596 | Hours | 06:00 AM-06:00 PM | Star Level | 3 Stars |
| | | Location Number | 004 | | |
| Facility Name | COMMUNITY KIDS JANESVILLE LRNG CTR | Contact | OESTREICH, KAYLA | Full Time | Y |
| Address | 2230 Center Ave Janesville, Wi 53546 | Phone # | 608-755-2488 | LICENSED Capacity | 115 |
| Category | LICENSED GROUP | LICENSED Date | 12/29/1996 | From Age | 0 Year(s), 0 Month(s), 2 Week(s) |
| Facility ID | 120067 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000555596 | Hours | 05:00 AM-11:59 PM | Star Level | 5 Stars |
| | | Location Number | 001 | | |
| Facility Name | CRADLES TO CRAYONS EARLY LEARNING | Contact | WEIR, MARY | Full Time | Y |
| Address | 606 N Main St Janesville, Wi 53545-2442 | Phone # | 608-758-3241 | LICENSED Capacity | 50 |
| Category | LICENSED GROUP | LICENSED Date | 06/08/2005 | From Age | 0 Year(s), 0 Month(s), 4 Week(s) |
| Facility ID | 1009173 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 8000555728 | Hours | 05:00 AM-09:00 PM | Star Level | 2 Stars |
| | | Location Number | 003 | | |

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|------------------------|--|------------------------|--------------------|--------------------------|------------------------------------|
| Facility Name | CREATIVE ARTS CLASS LLC | Contact | FOX, BETH | Full Time | Y |
| Address | 800 Main Edgerton, Wi 53534-2040 | Phone # | 608-884-6162 | LICENSED Capacity | 50 |
| Category | LICENSED GROUP | LICENSED Date | 09/04/2001 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1004409 | Months | Jan-Dec | To Age | 10 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 4000572264 | Hours | 06:45 AM-05:00 PM | Star Level | Not Rated |
| | | Location Number | 001 | | |
| Facility Name | CREATIVE CHILDRENS LEARNING CENTER | Contact | HORAN, CAROL | Full Time | Y |
| Address | 2419 Harvard Dr Janesville, Wi 53548 | Phone # | 608-754-7599 | LICENSED Capacity | 30 |
| Category | LICENSED GROUP | LICENSED Date | 09/26/2006 | From Age | 0 Year(s), 0 Month(s), 2 Week(s) |
| Facility ID | 1011138 | Months | Jan-Dec | To Age | 13 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000581666 | Hours | 05:00 AM-06:00 PM | Star Level | 4 Stars |
| | | Location Number | 001 | | |
| Facility Name | EDGERTON CHILDRENS CENTER | Contact | ENGLER, CATHERINE | Full Time | Y |
| Address | 414 Albion St Edgerton, Wi 53534 | Phone # | 608-884-6393 | LICENSED Capacity | 50 |
| Category | LICENSED GROUP | LICENSED Date | 08/30/2010 | From Age | 2 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1015398 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000555623 | Hours | 06:00 AM-06:00 PM | Star Level | 5 Stars |
| | | Location Number | 004 | | |
| Facility Name | EVANSVILLE KID CONNECTION LLC | Contact | STOKER, ERIKA | Full Time | - |
| Address | 420 S 4th St Evansville, Wi 53536 | Phone # | 608-220-4931 | LICENSED Capacity | 34 |
| Category | LICENSED GROUP | LICENSED Date | 09/26/2008 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1013730 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 5000577515 | Hours | 06:30 AM-06:00 PM | Star Level | 4 Stars |
| | | Location Number | 002 | | |
| Facility Name | FAITH'S LITTLE FRIENDS | Contact | PETCHAK, STEPHANIE | Full Time | Y |
| Address | 2116 Mineral Point Ave Janesville, Wi 53548 | Phone # | 608-754-9336 | LICENSED Capacity | 70 |
| Category | LICENSED GROUP | LICENSED Date | 11/05/2001 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1004220 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 8000572148 | Hours | 06:00 AM-06:00 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |

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| Facility Name | GROWING TREE CAMP | Contact | JACOBS, ANGELA | Full Time | Y |
| Address | 501 3rd St Beloit, Wi 53511-6211 | Phone # | 608-365-2261 | LICENSED Capacity | 24 |
| Category | LICENSED GROUP | LICENSED Date | 08/22/2018 | From Age | 6 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2004122 | Months | Jun-Aug | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000555563 | Hours | 07:00 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 020 | | |
| Facility Name | HACKETT'S FIRST STEP NURSERY SCHOOL | Contact | HACKETT, CINDY | Full Time | Y |
| Address | 1600 E Milwaukee St Janesville, Wi 53545 | Phone # | 608-752-7355 | LICENSED Capacity | 48 |
| Category | LICENSED GROUP | LICENSED Date | 09/01/2005 | From Age | 3 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1009650 | Months | Jan-Dec | To Age | 7 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000580139 | Hours | 09:00 AM-06:00 PM | Star Level | Not Rated |
| | | Location Number | 001 | | |
| Facility Name | JANESVILLE CHILD AND FAMILY CENTER | Contact | MISHLER, CAROL | Full Time | Y |
| Address | 1422 Center Ave Janesville, Wi 53546 | Phone # | 608-531-0177 | LICENSED Capacity | 80 |
| Category | LICENSED GROUP | LICENSED Date | 02/09/2000 | From Age | 3 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1002263 | Months | Sep-Jun | To Age | 5 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000577842 | Hours | 07:00 AM-05:00 PM | Star Level | 5 Stars |
| | | Location Number | 009 | | |
| Facility Name | JANESVILLE COMMUNITY DAY CARE CTR | Contact | MARSHALL, THERESA | Full Time | Y |
| Address | 3103 Ruger Ave Janesville, Wi 53546 | Phone # | 608-752-8035 | LICENSED Capacity | 97 |
| Category | LICENSED GROUP | LICENSED Date | 01/05/1997 | From Age | 2 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120072 | Months | Jan-Dec | To Age | 9 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000555663 | Hours | 05:15 AM-07:00 PM | Star Level | 5 Stars |
| | | Location Number | 001 | | |
| Facility Name | JNVL MONTESSORI CHILDRENS HOUSE LL | Contact | HEARN, TONIA | Full Time | Y |
| Address | 1219 S Oakhill Ave Janesville, Wi 53546 | Phone # | 608-754-9196 | LICENSED Capacity | 70 |
| Category | LICENSED GROUP | LICENSED Date | 05/04/2006 | From Age | 0 Year(s), 0 Month(s), 4 Week(s) |
| Facility ID | 1010458 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 8000581018 | Hours | 05:00 AM-06:30 PM | Star Level | 5 Stars |
| | | Location Number | 001 | | |

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| Facility Name | KIDDIE RANCH I I | Contact | HYDE-PULLIAM, CARMELA | Full Time | Y |
| Address | 1702 House St Beloit, Wi 53511-3351 | Phone # | 608-365-6141 | LICENSED Capacity | 72 |
| Category | LICENSED GROUP | LICENSED Date | 02/25/2019 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 2004376 | Months | Jan-Dec | To Age | 13 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 5000589705 | Hours | 05:00 AM-06:30 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | KIDS AND KIDS BILINGUAL DAYCARE | Contact | LEMA-HERNANDEZ, JOHANN | Full Time | Y |
| Address | 40 Old Highway 92 Evansville, Wi 53536-1300 | Phone # | 608-333-2189 | LICENSED Capacity | 20 |
| Category | LICENSED GROUP | LICENSED Date | 03/25/2013 | From Age | 0 Year(s), 0 Month(s), 4 Week(s) |
| Facility ID | 2001177 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000587683 | Hours | 06:00 AM-06:00 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | KIDS CLUB CHILDCARE CENTER | Contact | NYMAN, LISA | Full Time | Y |
| Address | 420 W Us Highway 11 Footville, Wi 53537-7105 | Phone # | 608-728-1555 | LICENSED Capacity | 35 |
| Category | LICENSED GROUP | LICENSED Date | 06/11/2007 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1011830 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555670 | Hours | 06:00 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 010 | | |
| Facility Name | KIDS KORNER | Contact | FELLOWS, JAMMIE | Full Time | Y |
| Address | 264 Lincoln St Evansville, Wi 53536 | Phone # | 608-882-6672 | LICENSED Capacity | 68 |
| Category | LICENSED GROUP | LICENSED Date | 03/12/1997 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 120077 | Months | Jan-Dec | To Age | 3 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000555672 | Hours | 05:45 AM-06:00 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | KIDS KORNER SACC | Contact | FELLOWS, JAMMIE | Full Time | Y |
| Address | 420 S 4th St Evansville, Wi 53536 | Phone # | 608-882-6654 | LICENSED Capacity | 116 |
| Category | LICENSED GROUP | LICENSED Date | 01/05/2004 | From Age | 3 Year(s), 4 Month(s), 0 Week(s) |
| Facility ID | 1007345 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000555672 | Hours | 05:30 AM-06:00 PM | Star Level | 3 Stars |
| | | Location Number | 003 | | |

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| Facility Name | KIDSPACE LEARNING CENTER | Contact | CLOUGH, BOBBI | Full Time | Y |
| Address | 2170 Murphy Woods Rd Beloit, Wi 53511-2664 | Phone # | 608-312-2140 | LICENSED Capacity | 63 |
| Category | LICENSED GROUP | LICENSED Date | 03/06/2017 | From Age | 0 Year(s), 0 Month(s), 4 Week(s) |
| Facility ID | 2003272 | Months | Jan-Dec | To Age | 7 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000589090 | Hours | 06:30 AM-05:30 PM | Star Level | 3 Stars |
| Location Number | | Location Number | 001 | | |
| Facility Name | KIDZWORKS PRESCHOOL AND DAYCARE | Contact | HOLDORF, BREANNE | Full Time | Y |
| Address | 2460 Milwaukee Rd Beloit, Wi 53511 | Phone # | 608-728-2391 | LICENSED Capacity | 50 |
| Category | LICENSED GROUP | LICENSED Date | 08/22/2007 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1012181 | Months | Jan-Dec | To Age | 7 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 8000582728 | Hours | 07:30 AM-05:30 PM | Star Level | 2 Stars |
| Location Number | | Location Number | 001 | | |
| Facility Name | KINDERCARE LEARNING CENTERS INC | Contact | SMITH, JULIE | Full Time | Y |
| Address | 3327 E Milwaukee St Janesville, Wi 53546 | Phone # | 608-755-9970 | LICENSED Capacity | 94 |
| Category | LICENSED GROUP | LICENSED Date | 01/05/1997 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 120073 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555710 | Hours | 05:00 AM-06:00 PM | Star Level | 5 Stars |
| Location Number | | Location Number | 001 | | |
| Facility Name | LADYBUG LANE PRESCHOOL LLC | Contact | WENTZLAFF, ELIZABETH | Full Time | Y |
| Address | 1839 Lafayette St Janesville, Wi 53546-2881 | Phone # | 608-563-2384 | LICENSED Capacity | 61 |
| Category | LICENSED GROUP | LICENSED Date | 09/01/2017 | From Age | 0 Year(s), 0 Month(s), 12 Week(s) |
| Facility ID | 2003582 | Months | Jan-Dec | To Age | 5 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000589266 | Hours | 07:00 AM-06:00 PM | Star Level | 3 Stars |
| Location Number | | Location Number | 001 | | |
| Facility Name | LEARNING TREE LLC | Contact | PERNOT, SARAH | Full Time | Y |
| Address | 1101 Suffolk Dr Janesville, Wi 53546-1608 | Phone # | 608-563-5833 | LICENSED Capacity | 70 |
| Category | LICENSED GROUP | LICENSED Date | 09/05/2017 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 2003563 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 8000589268 | Hours | 06:00 AM-06:00 PM | Star Level | 3 Stars |
| Location Number | | Location Number | 001 | | |

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| Facility Name | LITTLE LOVE BUGS EARLY LEARNING CENT | Contact | GORMAN, AMY | Full Time | Y |
| Address | 4450 Milton Ave 103 Janesville, Wi 53546-9673 | Phone # | 608-563-0524 | LICENSED Capacity | 40 |
| Category | LICENSED GROUP | LICENSED Date | 07/15/2019 | From Age | 0 Year(s), 3 Month(s), 0 Week(s) |
| Facility ID | 2004630 | Months | Jan-Dec | To Age | 5 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000589266 | Hours | 07:00 AM-06:00 PM | Star Level | 3 Stars |
| | | Location Number | 002 | | |
| Facility Name | LITTLE SPROUTS NURSERY SCHOOL | Contact | AUSTIN, JESSICA | Full Time | Y |
| Address | 2255 Prairie Ave Beloit, Wi 53511-2668 | Phone # | 608-312-4030 | LICENSED Capacity | 67 |
| Category | LICENSED GROUP | LICENSED Date | 10/31/2016 | From Age | 0 Year(s), 0 Month(s), 4 Week(s) |
| Facility ID | 2003126 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000589003 | Hours | 05:30 AM-05:30 PM | Star Level | 4 Stars |
| | | Location Number | 001 | | |
| Facility Name | LITTLE TURTLES' PLAYHOUSE | Contact | ADAMS, STEFANIE | Full Time | Y |
| Address | 819 Clary St Beloit, Wi 53511-5544 | Phone # | 608-362-2965 | LICENSED Capacity | 48 |
| Category | LICENSED GROUP | LICENSED Date | 09/03/2013 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2001451 | Months | Jan-Dec | To Age | 5 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000587903 | Hours | 06:00 AM-06:00 PM | Star Level | 3 Star |
| | | Location Number | 001 | | |
| Facility Name | LITTLE TWEETS CHILD CARE CENTER | Contact | LAMBERT, SARAH | Full Time | Y |
| Address | 709 Brown School Rd Evansville, Wi 53536-8106 | Phone # | 608-882-5805 | LICENSED Capacity | 50 |
| Category | LICENSED GROUP | LICENSED Date | 12/01/2014 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 2001939 | Months | Jan-Dec | To Age | 13 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000588399 | Hours | 05:00 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | MAGIC MOMENTS CHILD CARE CENTER | Contact | HARNACK, TINA | Full Time | Y |
| Address | 112 W Church St Evansville, Wi 53536 | Phone # | 608-882-6262 | LICENSED Capacity | 20 |
| Category | LICENSED GROUP | LICENSED Date | 03/13/1997 | From Age | 2 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120454 | Months | Jan-Dec | To Age | 10 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000555712 | Hours | 06:30 AM-05:30 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |

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| Facility Name | MERRILL SDB BELOIT CHILD FAMILY CENTE | Contact | MISHLER, CAROL | Full Time | - |
| Address | 1635 Nelson Ave Beloit, Wi 53511-3607 | Phone # | 608-361-2656 | LICENSED Capacity | 20 |
| Category | LICENSED GROUP | LICENSED Date | 09/02/2014 | From Age | 4 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2002070 | Months | Jan-Dec | To Age | 4 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000577842 | Hours | 07:50 AM-02:55 PM | Star Level | 5 Stars |
| | | Location Number | 021 | | |
| Facility Name | MILTON PRESCHOOL LEARNING CENTER | Contact | SCOTT, STEPHEN | Full Time | - |
| Address | 241 Northside Dr Milton, Wi 53563 | Phone # | 608-868-2860 | LICENSED Capacity | 16 |
| Category | LICENSED GROUP | LICENSED Date | 10/16/2007 | From Age | 3 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1012452 | Months | Sep-May | To Age | 6 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000574112 | Hours | 07:00 AM-05:00 PM | Star Level | Not Rated |
| | | Location Number | 002 | | |
| Facility Name | ORFORDVILLE AFTERSCHOOL PROGRAM | Contact | OLSON, CAROL | Full Time | Y |
| Address | 106 W Church St Orfordville, Wi 53576-8755 | Phone # | 608-931-3945 | LICENSED Capacity | 35 |
| Category | LICENSED GROUP | LICENSED Date | 01/23/2017 | From Age | 4 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2003224 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 7000589067 | Hours | 06:00 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | OUR LADY OF ASSUMPTION CCC | Contact | LETCHER, CASSANDRA | Full Time | Y |
| Address | 2160 Shopiere Rd Beloit, Wi 53511 | Phone # | 608-368-2835 | LICENSED Capacity | 49 |
| Category | LICENSED GROUP | LICENSED Date | 02/27/1998 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 120845 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000562103 | Hours | 07:00 AM-05:30 PM | Star Level | Not Rated |
| | | Location Number | 001 | | |
| Facility Name | PARKER YMCA PRESCHOOL | Contact | BEETS, MELODY | Full Time | Y |
| Address | 1360 Parkview Dr Milton, Wi 53563-3702 | Phone # | 608-868-9622 | LICENSED Capacity | 63 |
| Category | LICENSED GROUP | LICENSED Date | 12/02/2013 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 2001588 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000555769 | Hours | 06:30 AM-06:00 PM | Star Level | 3 Stars |
| | | Location Number | 004 | | |

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| Facility Name | PATHWAY PRESCHOOL LLC | Contact | SOTO, NICHOLE | Full Time | Y |
| Address | 312 S 3rd St Evansville, Wi 53536-1247 | Phone # | 608-314-7687 | LICENSED Capacity | 28 |
| Category | LICENSED GROUP | LICENSED Date | 05/20/2016 | From Age | 3 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2002762 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000588859 | Hours | 08:00 AM-11:15 AM | Star Level | Not Rated |
| | | Location Number | 001 | | |
| Facility Name | ROBINSON ELEMENTARY SCHOOL | Contact | JACOBS, ANGIE | Full Time | - |
| Address | 1801 Cranston Rd Beloit, Wi 53511-2539 | Phone # | 608-365-2261 | LICENSED Capacity | 20 |
| Category | LICENSED GROUP | LICENSED Date | 07/30/2000 | From Age | 4 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120155 | Months | Jan-Dec | To Age | 6 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000555563 | Hours | 02:30 PM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 006 | | |
| Facility Name | SMALL WONDERS LEARNING CENTER | Contact | DREW, ELIZABETH | Full Time | Y |
| Address | 880 Mcewan Ln Milton, Wi 53563 | Phone # | 608-868-5288 | LICENSED Capacity | 95 |
| Category | LICENSED GROUP | LICENSED Date | 08/24/2009 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1014629 | Months | Jan-Dec | To Age | 10 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000564160 | Hours | 06:30 AM-05:00 PM | Star Level | 3 Stars |
| | | Location Number | 002 | | |
| Facility Name | SMALL WONDERS LEARNING CENTER LTD | Contact | DREW, ELIZABETH | Full Time | Y |
| Address | 819 E High St Milton, Wi 53563-1528 | Phone # | 608-868-5288 | LICENSED Capacity | 54 |
| Category | LICENSED GROUP | LICENSED Date | 06/28/1998 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120866 | Months | Jan-Dec | To Age | 10 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000564160 | Hours | 06:30 AM-05:30 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | STATELINE FAMILY YMCA SAC POWERS | Contact | JACOBS, ANGELA | Full Time | - |
| Address | 620 Hillside Ave Beloit, Wi 53511 | Phone # | 608-365-2261 | LICENSED Capacity | 24 |
| Category | LICENSED GROUP | LICENSED Date | 07/30/2000 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120790 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000555563 | Hours | 02:40 PM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 005 | | |

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| Facility Name | STATELINE FAM YMCA GROWING TREE | Contact | JACOBS, ANGIE | Full Time | Y |
| Address | 501 3rd St Beloit, Wi 53511-6211 | Phone # | 608-365-2261 | LICENSED Capacity | 58 |
| Category | LICENSED GROUP | LICENSED Date | 03/09/1997 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 120329 | Months | Jan-Dec | To Age | 5 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000555563 | Hours | 07:00 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 003 | | |
| Facility Name | TAMIS TENDER TIMES | Contact | MCGUIRE, TAMI | Full Time | Y |
| Address | 460 Midland Rd Janesville, Wi 53546-2332 | Phone # | 608-563-4470 | LICENSED Capacity | 40 |
| Category | LICENSED GROUP | LICENSED Date | 07/17/2015 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 2002452 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 5000585685 | Hours | 06:30 AM-05:30 PM | Star Level | 2 Stars |
| | | Location Number | 002 | | |
| Facility Name | TAMIS TENDER TIMES INC | Contact | MCGUIRE, TAMARA | Full Time | Y |
| Address | 250 E Madison Ave Milton, Wi 53563-1360 | Phone # | 608-868-5427 | LICENSED Capacity | 50 |
| Category | LICENSED GROUP | LICENSED Date | 07/19/2010 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1015476 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 5000585685 | Hours | 06:00 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | THE SONSHINE PATCH CHRISTIAN SCHOOL | Contact | WIEDENHEFT, AMANDA | Full Time | - |
| Address | 2416 N Wright Rd Janesville, Wi 53546 | Phone # | 608-757-2240 | LICENSED Capacity | 24 |
| Category | LICENSED GROUP | LICENSED Date | 12/17/2009 | From Age | 2 Year(s), 6 Month(s), 0 Week(s) |
| Facility ID | 1014886 | Months | Sep-Jun | To Age | 5 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 7000585197 | Hours | 09:00 AM-12:00 PM | Star Level | Not Rated |
| | | Location Number | 001 | | |
| Facility Name | TODD SCHOOL Y CARE | Contact | JACOBS, ANGELA | Full Time | - |
| Address | 1621 Oakwood Ave Beloit, Wi 53511-5641 | Phone # | 608-361-4200 | LICENSED Capacity | 24 |
| Category | LICENSED GROUP | LICENSED Date | 09/01/2015 | From Age | 4 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2002569 | Months | Jan-Dec | To Age | 7 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000555563 | Hours | 02:45 PM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 018 | | |

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| Facility Name | TWO WORLDS ONE HEART CHILDCARE CE | Contact | GOLDEN, LULA | Full Time | Y |
| Address | 1613 Park Ave Beloit, Wi 53511-4514 | Phone # | 608-312-2755 | LICENSED Capacity | 20 |
| Category | LICENSED GROUP | LICENSED Date | 08/04/2015 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2002449 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 8000588588 | Hours | 05:00 AM-09:00 PM | Star Level | 2 Star |
| | | Location Number | 001 | | |
| Facility Name | WEE ONES GROUP CHILD CARE CENTER | Contact | HALLA, LEE ANN | Full Time | Y |
| Address | 618 Porter Rd Evansville, Wi 53536 | Phone # | 608-882-3400 | LICENSED Capacity | 105 |
| Category | LICENSED GROUP | LICENSED Date | 09/14/2004 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | 1008464 | Months | Jan-Dec | To Age | 10 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000577523 | Hours | 05:30 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | YMCA EARLY LEARNING CENTER | Contact | TAHTINEN, PENNY | Full Time | Y |
| Address | 221 Dodge St Janesville, Wi 53545 | Phone # | 608-754-9622 | LICENSED Capacity | 50 |
| Category | LICENSED GROUP | LICENSED Date | 12/29/1996 | From Age | 2 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120486 | Months | Jan-Dec | To Age | 11 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000555769 | Hours | 06:30 AM-06:00 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | YMCA Y-CARE EAST | Contact | BEETS, MELODY | Full Time | - |
| Address | 201 S Janesville St Milton, Wi 53563-1537 | Phone # | 608-868-9622 | LICENSED Capacity | 32 |
| Category | LICENSED GROUP | LICENSED Date | 09/03/2020 | From Age | 4 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2005167 | Months | Sep-Jun | To Age | 10 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000555769 | Hours | 06:30 AM-06:00 PM | Star Level | Not Rated |
| | | Location Number | 006 | | |
| Facility Name | YMCA Y-CARE WEST | Contact | BEETS, MELODY | Full Time | - |
| Address | 825 W Madison Ave Milton, Wi 53563-1035 | Phone # | 608-869-9622 | LICENSED Capacity | 20 |
| Category | LICENSED GROUP | LICENSED Date | 09/03/2020 | From Age | 4 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2005163 | Months | Sep-Jun | To Age | 10 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000555769 | Hours | 06:30 AM-06:00 PM | Star Level | Not Rated |
| | | Location Number | 005 | | |

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| Facility Name | YOUNG HEARTS CHILDCARE | Contact | WAINWRIGHT, AYNTHIA | Full Time | Y |
| Address | 2004 S Afton Rd Beloit, Wi 53511-2058 | Phone # | 608-312-2155 | LICENSED Capacity | 22 |
| Category | LICENSED GROUP | LICENSED Date | 02/01/2013 | From Age | 0 Year(s), 0 Month(s), 2 Week(s) |
| Facility ID | 1016045 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 4000585594 | Hours | 05:00 AM-05:30 PM | Star Level | 2 Stars |
| | | Location Number | 002 | | |
| Facility Name | YWCA ADAMS CHILD CARE CENTER | Contact | LEINBAUGH, JANET | Full Time | - |
| Address | 1138 E Memorial Janesville, Wi 53545 | Phone # | 608-743-6347 | LICENSED Capacity | 26 |
| Category | LICENSED GROUP | LICENSED Date | 12/29/1996 | From Age | 4 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120148 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | YWCA CONSOLIDATED CHILDCARE CENTE | Contact | GRIAR, DARLENE | Full Time | - |
| Address | 4838 N County Road F Janesville, Wi 53545-8906 | Phone # | 608-868-9595 | LICENSED Capacity | 20 |
| Category | LICENSED GROUP | LICENSED Date | 09/01/2015 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 2002542 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-08:35 AM | Star Level | 3 Stars |
| | | Location Number | 028 | | |
| Facility Name | YWCA DISCOVERY CENTER | Contact | GRAHAM, VANESSA | Full Time | Y |
| Address | 1735 S Washington St Janesville, Wi 53546 | Phone # | 608-752-5445 | LICENSED Capacity | 50 |
| Category | LICENSED GROUP | LICENSED Date | 03/13/1997 | From Age | 3 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1003766 | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 002 | | |
| Facility Name | YWCA HARMONY CHILD CARE PROGRAM | Contact | GRAHAM, VANESSA | Full Time | - |
| Address | 4243 E Rotamer Rd Janesville, Wi 53546 | Phone # | 608-868-9360 | LICENSED Capacity | 50 |
| Category | LICENSED GROUP | LICENSED Date | 10/06/2008 | From Age | 4 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1013737 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 026 | | |

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| Facility Name | YWCA HARRISON CHILD CARE PROGRAM | Contact | GRAHAM, VANESSA | Full Time | - |
| Address | 760 Princeton Rd Janesville, Wi 53546-2027 | Phone # | 608-743-6447 | LICENSED Capacity | 34 |
| Category | LICENSED GROUP | LICENSED Date | 08/27/2000 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1003141 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 014 | | |
| Facility Name | YWCA JEFFERSON CHILD CARE PROGRAM | Contact | LEINBAUGH, JANET | Full Time | - |
| Address | 1831 Mt Zion Ave Janesville, Wi 53545 | Phone # | 608-743-6608 | LICENSED Capacity | 26 |
| Category | LICENSED GROUP | LICENSED Date | 07/30/2000 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120347 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 3 Stars |
| | | Location Number | 006 | | |
| Facility Name | YWCA KENNEDY CHILD CARE PROGRAM | Contact | LEINBAUGH, JANET | Full Time | - |
| Address | 3901 Randolph Rd Janesville, Wi 53546 | Phone # | 608-743-7567 | LICENSED Capacity | 40 |
| Category | LICENSED GROUP | LICENSED Date | 07/30/2000 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1002000 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 2 Stars |
| | | Location Number | 007 | | |
| Facility Name | YWCA LINCOLN CHILD CARE PROGRAM | Contact | LEINBAUGH, JANET | Full Time | - |
| Address | 1821 Conde St Janesville, Wi 53546 | Phone # | 608-743-6785 | LICENSED Capacity | 22 |
| Category | LICENSED GROUP | LICENSED Date | 07/30/2000 | From Age | 4 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120149 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 4 Stars |
| | | Location Number | 008 | | |
| Facility Name | YWCA MADISON CHILD CARE PROGRAM | Contact | GRAHAM, VANESSA | Full Time | - |
| Address | 331 N Grant Ave Janesville, Wi 53548 | Phone # | 608-743-6847 | LICENSED Capacity | 34 |
| Category | LICENSED GROUP | LICENSED Date | 08/22/2004 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1008120 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 2 Star |
| | | Location Number | 016 | | |

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| Facility Name | YWCA MONROE CHILD CARE PROGRAM | Contact | GRAHAM, VANESSA | Full Time | - |
| Address | 55 S Pontiac Janesville, Wi 53545 | Phone # | 608-743-6947 | LICENSED Capacity | 34 |
| Category | LICENSED GROUP | LICENSED Date | 07/30/2000 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1002940 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 4 Stars |
| | | Location Number | 013 | | |
| Facility Name | YWCA ROOSEVELT CHILD CARE PROGRAM | Contact | GRAHAM, VANESSA | Full Time | - |
| Address | 316 Ringold Janesville, Wi 53545 | Phone # | 608-743-7047 | LICENSED Capacity | 34 |
| Category | LICENSED GROUP | LICENSED Date | 07/30/2000 | From Age | 4 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120345 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 4 Star |
| | | Location Number | 010 | | |
| Facility Name | YWCA VAN BUREN CHILD CARE PROGRAM | Contact | GRAHAM, VANESSA | Full Time | - |
| Address | 1515 Lapham Janesville, Wi 53546 | Phone # | 608-743-7147 | LICENSED Capacity | 34 |
| Category | LICENSED GROUP | LICENSED Date | 07/30/2000 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120346 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 3 Star |
| | | Location Number | 011 | | |
| Facility Name | YWCA WASHINGTON CHILD CARE PROGRA | Contact | GRAHAM, VANESSA | Full Time | - |
| Address | 811 N Pine St Janesville, Wi 53548-2855 | Phone # | 608-743-7247 | LICENSED Capacity | 34 |
| Category | LICENSED GROUP | LICENSED Date | 07/30/2000 | From Age | 4 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 120324 | Months | Sep-Jun | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000555770 | Hours | 06:30 AM-06:00 PM | Star Level | 4 Stars |
| | | Location Number | 012 | | |