

Accessible Customer Service/Employee Feedback Form

Customer/Employee Contact Information:

Name:

Address:

City:

Province:

**Postal
Code:**

Phone:

Email:

Date:

Please check appropriate boxes and fill out required sections:

- | | | | | |
|---|---|--------------------------|---------------|--------------------------|
| 1. Is the feedback a Concern or a Compliment? | Concern | <input type="checkbox"/> | Compliment | <input type="checkbox"/> |
| 2. Is the feedback regarding a facility or a service? | Facility | <input type="checkbox"/> | Service | <input type="checkbox"/> |
| 3. If the feedback is regarding a facility, what is the name of the site? | Advance | <input type="checkbox"/> | Division | <input type="checkbox"/> |
| | Sharbot | <input type="checkbox"/> | Other | <input type="checkbox"/> |
| | Lake | | Northbrook | <input type="checkbox"/> |
| | | | Barrett House | <input type="checkbox"/> |
| 4. What does the feedback pertain to? | Accessible | <input type="checkbox"/> | | |
| | Communication | | | |
| | Assistive Devices | <input type="checkbox"/> | | |
| | Service Animals | <input type="checkbox"/> | | |
| | Service Disruption | <input type="checkbox"/> | | |
| | Support Persons | <input type="checkbox"/> | | |
| | Other (please specify in the additional comments section below) | <input type="checkbox"/> | | |
| 5. What is the best way to contact you? | Email | <input type="checkbox"/> | | |
| | Phone | <input type="checkbox"/> | | |
| | Other (Please specify in the additional comments section below) | <input type="checkbox"/> | | |

Details of the Feedback: (If required, please use additional pages)

Additional Comments: (If required, please use additional pages)

Return Completed Form To

In Person: At any of our Agency Reception counters
 Attention: Human Resources

By Mail: 817 Division Street.
 Kingston, ON K7K 4C2

By Fax: (613) 542-4428

By Email: hr@facsfla.ca

We welcome your feedback, alternate accessible formats and
 communication supports can be arranged upon request.