



Accessibility Feedback Form

This form can be emailed to accessibility@von.ca, hand delivered to a VON office in your area or mailed to **VON Canada**, Accessibility C/O VP's Office 301-2150 Islington Ave, Toronto, ON M9P 3V4

We want to know how we are doing—and how we can improve your experience. Please provide us with your feedback and comments. We are listening!

Please select the topic of your feedback			
<input type="checkbox"/>	Physical accessibility/barriers		
<input type="checkbox"/>	Service provision		
<input type="checkbox"/>	General accessibility concern		
<input type="checkbox"/>	Website experience		
<input type="checkbox"/>	Customer service		
<input type="checkbox"/>	Other		
When did you visit us or receive a visit from us?			
What was the time of the visit?			
Did we respond to your customer service needs today?	yes <input type="checkbox"/>	no <input type="checkbox"/>	somewhat <input type="checkbox"/>
Was our customer service provided to you in an accessible manner?	yes <input type="checkbox"/>	no <input type="checkbox"/>	somewhat <input type="checkbox"/>
If No, please explain.			
Did you have any problems accessing our services?	yes <input type="checkbox"/>	no <input type="checkbox"/>	somewhat <input type="checkbox"/>
If Yes, please explain.			
Personal information (optional)			
First name:			
Last name:			
Email address:			
Telephone:			
Would you like to be contacted regarding your feedback / concern(s)?	yes <input type="checkbox"/>	no <input type="checkbox"/>	

Thank you for providing your feedback!