



AODA Visitor/Customer Feedback Form

AarKel Tool and Die In. is committed to treating all people in a way that allows them to maintain their dignity and independence. We believe in integration and equal opportunity. We are committed to meeting the needs of people with disabilities in a timely manner, and will do so by presenting and removing barriers to accessibility and meeting accessibility requirements under the Accessibility for Ontarians with Disabilities Act.

Should you wish to provide feedback on the manner in which we provided or could improve upon accommodation to a person with a disability please complete the following and return to your host or our HR Manager or President by mail, phone, fax or email. hr@aarkel.com

Date form completed: _____ Date and Time of Incident: _____

Service, Facility and/or individual(s) involved: _____

Did you have trouble accessing any of our services or facilities? Yes ___ No ___

Were you pleased by the service you received by our staff? Yes ___ No ___

Please provide any details of your experience below: *Please attach additional information if required*

What could we do to improve our service to you? *Please attach additional information if required*

We can provide or arrange for accessible feedback and alternate formats upon request.

All feedback will be forwarded to our President for review. If your feedback raises serious concerns with respect to our meeting accommodation needs we will provide a response to your concerns within 3 business days.

Please provide your contact information:

Name: _____ Contact Info: _____