



Sensity

Deafblind and Sensory

Réseau canadien de soutien à la

Support Network of Canada

surdicécité et troubles sensoriels

Feedback Form

Sensity is committed to providing accessible customer service. We welcome your comments to help us monitor and improve our services and your experiences.

Which Sensity location did you visit?		
Time and date of visit?		
What was the purpose of your visit?		
Which service were you accessing?		
Was the service provided to you in an accessible manner/format?	Yes:	No:
Did you encounter any barriers or difficulties accessing services?	Yes:	No:
Did we respond to your customer service needs?	Yes:	No:
Do you wish to be contacted regarding your customer service experience?	Yes:	No:

Please provide details regarding your customer service experience:

If you wish to be contacted, please provide your information:

First Name:	
Last Name:	
Street Address:	
Town:	
Daytime Phone Number:	Evening Phone Number:
Email Address:	
How would you like to be contacted?	

Personal information contained on this form is collected pursuant to AODA 2005 and will be used for the purpose of responding to your comments or request.