

## Feedback/Comment Form

The Municipality of Hastings Highlands would like your input on improving Accessibility throughout Hastings Highlands. Please take a few minutes to complete this form and let us know what you think.

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How did you find out about the Hastings Highlands Multi-Year Accessibilit	y Plan?		
Are you a resident of Hastings Highlands?			
Yes No			
3. Are you a person with a disability?			
Yes No			

4. What	do you see as the key issue	facing people witl	n disabilities in Hastings
піўпіап	Awareness	Lack of Service	s/Support
	Attitudes	Barriers in com	mercial sector
	Housing	Lack of Access	ibility Standards
	Others	Social Assistan	ce
	Lack of Information	1	
5. What	do you like about the plan? (	choose all that ap	pply)
Overall layout & format			Information concerning the plans the municipality has to improve service and programs in the future.
Information concerning the action the municipality has already taken to ensipeople with disabilities can use their programs and services		ensure	How the municipality will identify barriers within their programs and services
The types of barriers that will be addressed this year		addressed	The participation of all municipal departments in accessibility planning
0	ther		
•	ou think there has been impro s Highlands?	vement in access	sibility issues in the Municipality of
	Yes	No	
If yes, v	hat has improved? If no, plea	ase explain.	

7. Is the Multi-Year Accessibility	y Plan easy to read and understand?
Yes No	
If no, why?	
8. Are you a member of an orgato people with disabilities in Has	anization or agency that represents or provides services stings Highlands?
If yes, what is the name of the o	organization?

## Thank you!

You can return your completed form by:

Clerk's Department
Municipality of Hastings Highlands
P.O. Box 130
33011 Hwy 62N,
Maynooth, ON K0L 2S0
Fax: (613) 338-3292

Email: info@hastingshighlands.ca