Accessibility Feedback Form

Name: **Date:**

Contact information:

If you have any feedback, concerns or suggestions with how N.E.E.D.S. Inc. provides accessible services, please let us know in the section below:

Would you like a representative from N.E.E.D.S. Inc. to follow up you with regarding your feedback? Yes ☐ / No ☐ If yes, please provide your contact information above, or please state an alternative way in which we can reach you:

Please email your feedback to ***needsinc@mymts.net*** or send this form to

Newcomers Employment & Education Development Services (N.E.E.D.S.) Inc.
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