

Request for Accessible Service and/or Request for Alternate Format

Date:

Client Information

Name:

Telephone #:

Email:

Support Person Information (if applicable)

Name:

Telephone #:

Email:

Agency:

1. Request for Accessible Service

Which program, service or meeting will you be taking part in?

On which day and time would you like to attend?

Will you be bringing any type of assistance that we can accommodate?

(Click on box beside items that apply.)

support person

service animal

assistive device

communication device

Please describe any arrangements or accommodation that would be of assistance to you (e.g. power for electronics, water for service animals, space for devices).

We will contact you to discuss your request and confirm accommodation arrangements.

2. Request for Alternate Format

To request a document in an alternate format, please provide:

Name of document: _____

Alternate format type: _____

Date required: _____

We will provide the accessible format in a timely manner and, at no additional cost.

Please add any other comments you may have:

Please submit this completed form to Hastings Prince Edward Public Health.

Email: Complete this form, save it to your computer and email to accessibility@hpeph.ca.

In person or mail: Print, complete, and submit this form to:
Hastings Prince Edward Public Health
179 North Park Street, Belleville, ON K8P 4P1

Call: 613-966-5500 / Toll-Free: 1-800-267-2803 / TTY: 711

For more information please visit www.hpePublicHealth.ca.

OFFICE USE ONLY

Date request received: _____

Received by: _____

Accommodation provided: _____

Please forward completed form to Corporate Admin. Assistant.

We are committed to providing accessible publications, programs and services to all. For assistance, please call 613-966-5500; TTY: 711 or email accessibility@hpeph.ca. For more information, please visit www.hpePublicHealth.ca.