



ST. ANDREW'S UNITED CHURCH

399 CASSELLS STREET, NORTH BAY, ONTARIO P1B 3Z4

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CUSTOMER SERVICE ACCESSIBILITY - TRAINING RECORD

(NOTE: SECTIONS A, B OR C, D AND F MUST BE COMPLETED)

A	<p>IDENTIFICATION</p> <p>Name (please print) _____</p> <p>Staff <input type="checkbox"/> Volunteer <input type="checkbox"/> Role: _____</p> <p>_____</p>
B	<p>PREVIOUS TRAINING</p> <p><input type="checkbox"/> I have already received training in Customer Accessibility for Persons with a Disability through: another <input type="checkbox"/> employer, <input type="checkbox"/> non-profit organization, or <input type="checkbox"/> Ontario Govt. agency. namely: _____.</p> <p>(if you already received training, proceed to section D)</p>
C	<p>TRAINING VIDEO: SERVE-ABILITY: TRANSFORMING ONTARIO'S CUSTOMER SERVICE</p> <p><input type="checkbox"/> I have viewed the complete Ontario Government's training video offered online at: www.mcss.gov.on.ca/mcss/serve-ability/splash.html (or via the Church website) and understand the requirements of the Accessibility Act regarding Customer Service.</p>
D	<p>DOCUMENTS (THESE ARE LOCATED IN BLUE RESOURCE FOLDER):</p> <p><input type="checkbox"/> I have read and understand <i>St. Andrew's United Church Customer Accessibility Policy (October 2011)</i>.</p> <p><input type="checkbox"/> I am aware of the resource document titled <i>Tips on Providing Services to Persons with Disabilities who are Attending St. Andrew's United Church</i>, and the nature of the information that it provides.</p>
E	<p>CHURCH- PROVIDED DEVICES (The following only applies to staff or volunteers that help our customers with church supplied assisted devices such as the <i>lift</i> and <i>hearing devices</i>.)</p> <p><input type="checkbox"/> I have received training on _____ in accordance with St. Andrew's Customer Accessibility Policy.</p>
F	<p>PLEASE SIGN AND DATE</p> <p>Signature: _____</p> <p>Date: _____</p> <p>PLEASE RETURN COMPLETED SHEET TO THE CHURCH OFFICE WHERE IT WILL BE KEPT ON FILE</p>