Accessibility feedback form

We want to hear from you and know the specific barriers you face when you are trying to access City Library or its programs or services.

Use this form to:

- Describe the experience and how it impacted you
- Make recommendations of how barriers can be removed
- Tell us about something we are doing to improve accessibility

Collection notice

All questions in this form are optional. You can share as much or as little as you want. A designate at City Library will read the information you provide and may share some of this information with others to help them address the barrier(s). We will make every effort to protect privacy, but cannot guarantee total anonymity.

We are collecting your personal information to help us identify barriers at City Library. Section 26(c) of the Freedom of Information and Protection of Privacy Act permits this collection.

If you have questions about the collection, use and disclosure of your information, please contact the Privacy Officer at privacy@nvcl.ca.

1. Tell us about a problem accessing City Library or its programs or services.

? I am describing a barrier that I experienced.
? I am describing a barrier that someone else experienced.

What is your relationship to the person who experienced the barrier?

? Parent/guardian
? Family member
? Advocate
? Support person
? Library employee
? Witness
? Other…

Please describe...

2. Did the barrier relate to any of the following?

? Built environment (e.g. building or signage)
? Delivery of program or service (e.g. the behaviour or attitude of the person leading the program or serving you)
? Employment (e.g. applying for a job)
? Information and communication (e.g. finding or reading information)
? Transportation and parking (e.g. accessing the library)
? Other…

Please describe ...

3. How were you trying to access the service? (Select all that apply)

? In person
? By phone
? By email
? Online

4. Tell us about the experience. Describe what you/they were trying to do, what service you were trying to access (if relevant), and how the experience impacted you. (1000 characters maximum).

5. Attach files below if it helps to describe the experience. You can attach files like video, audio or photos. If you use ASL, you can upload a video here. Do not include video, audio or photos of another person without their permission.

Upload a video file here

Choose a file Upload

One file only.
30 MB limit.
Allowed types: avi mov mp4 ogg wav webm.

Upload an audio file here

Choose a file Upload

One file only.
30 MB limit.
Allowed types: mp3 ogg wav m4a.

Upload image files here

1 MB per image

Choose a file a file

Upload

Maximum 20 files.
1 MB limit.
Allowed types: gif jpg jpeg png webp.

6. What recommendations do you have for City Library to improve accessibility?

7. Tell us about something we are doing to improve accessibility.

8. May someone from City Library contact you regarding the barrier(s)? There may be someone specific responsible for the barrier(s) and they may wish to further clarify your feedback. This does not guarantee they will contact you.

Please provide your preferred contact info.