
**CHILD AND FAMILY SERVICES REVIEW BOARD/CUSTODY REVIEW BOARD
ACCESSIBILITY FOR PEOPLE WITH DISABILITIES POLICY FRAMEWORK**

CHILD AND FAMILY SERVICES REVIEW BOARD/CUSTODY REVIEW BOARD

RECORD OF FEEDBACK

Date feedback received:

Name:

Contact Information:

Details:

Follow-up Requested:

Please note if you have, or have had, an application with the Board, this information collected here will not be included in your file.

FOR OFFICE USE ONLY

Date Received:

Action to be taken:

Manager's Signature:

Date: