



DIRECTORY OF EMPLOYMENT SERVICES Submission Form

Your Contact Information:

please note some fields are required *

Your Name:

Your E-mail

Contact information for your organization:

Organization

Street Address 1

Street Address 2

City

Province

Postal Code

Phone Number (include area code)

TDD/TTY (include area code)

General E-mail

Website

Information about your organization:

What geographic area do you serve? (eg. Greater Winnipeg, Interlake District, etc.)

Please provide a **Summary/Overview** statement of your organization and its mission or purpose (**one paragraph - maximum 100 words**)

Please provide a summary statement of **services you provide to individuals with disabilities** - include any particular disability focus - eg. "We serve individuals with intellectual disabilities" (**one paragraph - maximum 50 words**)

Please provide a summary of **services provided to Employers** - such as job applicants, online coaching, job stabilization support, training seminars on disability and accommodation, etc. **(one paragraph - maximum 50 words)**

Ability Axis Newsletter sign-up

Yes, make sure I get added to the newsletter list

No thanks, not at this time

Thanks, I am already receiving the newsletter

Thank you so much! Please click on the submit button to send your information to us.