

## Questionnaire for a Company

- 1 Name of Company \_\_\_\_\_
- 2 Address: \_\_\_\_\_
- 3 Name of person completing questionnaire: \_\_\_\_\_  
Title: \_\_\_\_\_
- 4 Type of Manufacturing or Service: \_\_\_\_\_
- 5 Type of jobs within the Company (Please indicate the numbers of jobs in each area or (NA) if not applicable to your Company)  
Clerical \_\_\_\_\_ Labour \_\_\_\_\_ Maintenance \_\_\_\_\_  
Sales \_\_\_\_\_ Managerial Positions \_\_\_\_\_  
Other (Please Specify) \_\_\_\_\_
- 6 Is the Company unionized?    yes \_\_\_\_\_    no \_\_\_\_\_
- 7 Number of employees:    male \_\_\_\_\_    female \_\_\_\_\_
- 8 Are you now employing physically handicapped individuals?  
yes \_\_\_\_\_    no \_\_\_\_\_
- 9 Have any building adaptations been made in your facility to allow these workers to be employed at your Company?  
yes \_\_\_\_\_    no \_\_\_\_\_    NA \_\_\_\_\_
- 10 Would you be interested in hiring mobility impaired employees who have marketable competitive skills?  
yes \_\_\_\_\_    no \_\_\_\_\_
- 11 Would work areas be suitable for the mobility impaired individuals (eg. lowered work tables, space for a wheelchair, etc.)  
Clerical Areas:            yes \_\_\_\_\_    no \_\_\_\_\_  
Maintenance Areas:    yes \_\_\_\_\_    no \_\_\_\_\_  
Managerial Areas:        yes \_\_\_\_\_    no \_\_\_\_\_  
Labouring Areas:         yes \_\_\_\_\_    no \_\_\_\_\_  
Sales Areas:              yes \_\_\_\_\_    no \_\_\_\_\_  
Other Areas:              yes \_\_\_\_\_    no \_\_\_\_\_

### Entrances

#### Name of Building:-

- 1 Is at least one primary entrance ramped or at ground level with no steps?  
yes \_\_\_\_\_    no \_\_\_\_\_
- 2 If steps, how many?    yes \_\_\_\_\_    no \_\_\_\_\_
- 3 Is the ramp built to slope no more steeply than the ratio of 1 inch rise for twelve inches of length?  
yes \_\_\_\_\_    no \_\_\_\_\_
- 4 Where there are steps or ramps, are handrails of 32" in height provided?  
yes \_\_\_\_\_    no \_\_\_\_\_
- 5 Are doors at least 32 inches wide?    yes \_\_\_\_\_    no \_\_\_\_\_
- 6 Are doors lightweight (8 lbs. or under) and slow closing?  
yes \_\_\_\_\_    no \_\_\_\_\_
- 7 Where turnstiles or revolving doors are used, is there a clearly marked, alternate, accessible route provided?  
yes \_\_\_\_\_    no \_\_\_\_\_
- 8 Are thresholds at entrances to the rooms and buildings no greater than 1/2 inch in height?  
yes \_\_\_\_\_    no \_\_\_\_\_
- 9 Does the entrance provide access to the remainder of the building?  
yes \_\_\_\_\_    no \_\_\_\_\_

### Mobility Within the Building

1. Are all floors of a non-slip texture?    yes \_\_\_\_\_    no \_\_\_\_\_
2. Are corridors at least 36 inches wide?    yes \_\_\_\_\_    no \_\_\_\_\_
3. Are all level changes connected by ramps or elevators?    yes \_\_\_\_\_    no \_\_\_\_\_
4. Within elevators, are all controls reachable (45" high) by a wheelchair bound individual?  
yes \_\_\_\_\_    no \_\_\_\_\_
5. Do the doors of the elevator remain open long enough to allow sufficient time to enter or leave the elevator cab?  
yes \_\_\_\_\_    no \_\_\_\_\_
6. Are fixtures such as telephones, drinking fountains, and light switches within easy reach by all?  
yes \_\_\_\_\_    no \_\_\_\_\_
7. Can a handicapped person in a wheelchair, enter and use your facilities unaided.  
yes \_\_\_\_\_    no \_\_\_\_\_