



AIM Profile

Employer Response

Please complete and send to aim@ccrw.org

Business Name (or business number):

Requester Information:

Name:

Work address:

Email address:

Phone number:

Business Sector (*select one*):

- Not-for-profit For-profit corporation
 Educational institute Government

Estimated number of employees at your organization (*select one*):

- Less than 10 employees
 10-99 employees
 100-499 employees
 500+ employees

Does your business have accessibility/accommodation policies and practices currently in place (*select one*)?

- Yes No Unsure

Number of employees seeking support from AIM services:

Please provide any additional details to help us understand the nature of your request: