

## Survey for Organizations Representing Individuals with Disabilities

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

If you prefer to submit hard copy,  
please mail or deliver completed  
survey to:

Butte County Office of Education  
Tim Taylor, Superintendent  
1859 Bird Street  
Oroville, CA 95965

The following questions have been developed to determine how organizations and advocacy agencies perceive the Butte County Office of Education's ability to provide services and accommodations for individuals with disabilities.

1. What direct communications have you held with the Butte County Office of Education to facilitate services and accommodations for individuals with disabilities?
2. Are there any specific complaints or problems regarding access for individuals with disabilities to any of the programs, services or activities provided by the Butte County Office of Education?
3. What information or other resources can you supply to help educate or inform the Butte County Office of Education about your organization and your services for individuals with disabilities?
4. What general guidance, advice or assistance could your organization provide to the Butte County Office of Education to protect against potential discrimination of individuals with disabilities in its programs, services and activities?