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| **211 British Columbia Services Society***“Looking for community, social or government services? Simply dial: 2-1-1.”***Resource Profile Sheet – 211 Yukon** | ***Return to:*** Resources & Publications Department Email: updates@bc211.ca  ***Sent by:*** Name: ................................... Fax: .................................... Phone: ................................. |
| **Program name** |  |
| **Agency name** |  |
| **AKA** (*also known as*) |  |
| **Street address** |  | **Confidential?** Y/N |
| **Mailing address** *(if different from above)* | **Confidential?** Y/N |
| **Telephone** | **Fax** |
| Email |  |
| Website |  |
| **Facebook** | **Twitter** @ |
| **Description of program** |  |
| **Legal status of agency***(mark all that apply)* | Not-for-profit:Registered society#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Registered charity#**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | Government:Municipal FederalProvincialRegional | ***Other (specify):***For-profit Self-help group |
| **Funding sources for program** |  |
| **Program hours** |  |
| **Business hours** |  |
| **Geographic restrictions** *(list specific cities/towns)* |  |
| **Application/referral process** |  |
| **Client eligibility** |  |
| **Cost to client** |  |
| **Accessibility for people with disabilities** |  |
| **Languages service is offered in** *(other than English)* |  |
| **Interpretation/translation services** |  |
| **Capacity** *(number of beds or other limiting factors)* |  |
| **Waiting list** |  |
| **How long program/agency been in existence** *(month/year)* |  |
| **Licensing/accreditation**  |  |
| **Additional information** |  |
| **Person completing this form** *(name, title, and phone number)* |  |
| **Signature** | **Date** |

## See [www.bc211.ca](http://www.bc211.ca) for more information about bc211.