



SUFAC Application Form

If you are interested in joining Cota's Service User and Family Advisory Council (SUFAC), we would like to know a little more about you. Please complete this form to share a bit about yourself and how you feel you may be able to contribute:

1. What is Your Name?

2. What is the best way to reach you?
 - By phone at:
 - By e-mail at:
 - Other (please specify)

3. Why do you want to join Cota's SUFAC?

4. Which of Cota's target populations do you most closely identify with?
 - Mental Health
 - Acquired Brain Injury (ABI)
 - Developmental Disability
 - Dual Diagnosis

5. Are you a Cota Service User or are you a Family Member (e.g., parent, spouse, sibling) of a Cota service user?
 - I am a Cota Service User
 - I am a Family Member of a Cota service user

6. What support would you need to help you participate to the best of your abilities?

7. What would you be hoping to gain from the experience?

8. What is a convenient time for you to attend meetings?

Please complete the application form and either give it to your service provider to submit or email it directly to feedback@cotainspires.ca.

Cota is deeply committed to promoting diversity, advancing equity and fostering a culture of inclusion. We are respectful of each individual's dignity, unique experience, potential and protected rights in line with the grounds laid out by the Ontario Human Rights Code. We are actively striving for a membership that reflects the diverse perspectives, lived experiences, unique backgrounds and characteristics that are reflective of the individuals and communities that we serve.

If you have any questions or need more information, please speak to your service provider.

THANK YOU!