



DIVERSE ABILITIES EMPLOYMENT RECOGNITION STICKER APPLICATION

CONTACT INFORMATION

Business Name: _____

Address: _____ City / State: Kirkwood, MO 63122

Phone: _____ Owner's Name: _____

Number of Employees with diverse abilities: _____

When were these employees hired: _____

Have you partnered with any agency in providing training and/or employment? Yes No

If Yes, what agency: _____

PERMISSION

I, _____, give my permission to publicize receipt of the Diverse Abilities Employment Recognition Sticker on the City of Kirkwood Human Rights Commission on the Facebook page: Yes No

I, _____, give my permission to publicize receipt of the Diverse Abilities Employment Recognition Sticker on the City of Kirkwood Human Rights Commission in the Webster-Kirkwood Times: Yes No