

Phone     Walk-In     Email     Fax     Mail

Contact (Date): \_\_\_\_\_ / By: \_\_\_\_\_ File # \_\_\_\_\_

Postal Code:	Name:
Name:	Worker/Office Name:
Phone #:	Contact #:
Address:	File # (if any):
Email:	

MSP     HEALTH     IA     ICBC     WCB     OTHER: \_\_\_\_\_

**Briefly explain what you may need advice/assistance with today:**

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**ACTION by CONSTITUENT:**

MLA involvement works best after the constituent has tried to solve the problem through the usual channels or appeal procedures.

Our policy is to, wherever possible, have individuals make the first steps towards solving the problem. If you are not sure what the steps are we will help you to understand what you can do on your own.

**What steps have you taken to solve the problem?**

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**REQUEST**

If it is apparent you still have not been able to solve the problem we will review the situation and see if there is anything we can do to help. This may mean making a phone call or sometimes helping you write a letter. We are bound by the same rules that you are but sometimes we can help when communication has broken down or we think there may have been an error in interpretation. In some circumstances, Adrian Dix may want to write a letter suggesting a change or solution.

**Knowing that there are no guarantees, what can you accept or what do you want to see happen?**

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**ACTION ONE:**

**OFFICE**

- To Do book
- Maximizer
- Consent Signed Date: \_\_\_\_\_

**MLA APPOINTMENT**

- To Do Book
- Date: \_\_\_\_\_  No
- Calendar

**ACTION TWO –  ENTER IN Maximizer**

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**Progress Notes:**

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