

# **Express Your Opinion!!!**

## **2016-7 Michigan Needs Assessment Survey**



Are you an INDIVIDUAL WITH A DISABILITY or a FRIEND or FAMILY MEMBER of someone with a disability?

Do you want to SHARE YOUR OPINIONS about the needs and services for individuals with disabilities in your community?

If you answered **YES**, then you qualify to take an important survey about the service needs for people with disabilities in our Michigan communities.

**TO TAKE THE SURVEY **ON-LINE**, GO TO:**  
[www.michigan.gov/mrs](http://www.michigan.gov/mrs)

*OR*

**TO TAKE THE SURVEY **BY PHONE**,**  
**PLEASE CALL Su Pi at:**  
**(517) 432-0273**

**Project Excellence**  
**Michigan State University**

**Your **OPINION** is **VERY IMPORTANT** to us!**