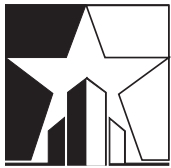


The Locally Affiliated Wellness Council  
APPLICATION

# WELL WORKPLACE REVIEW

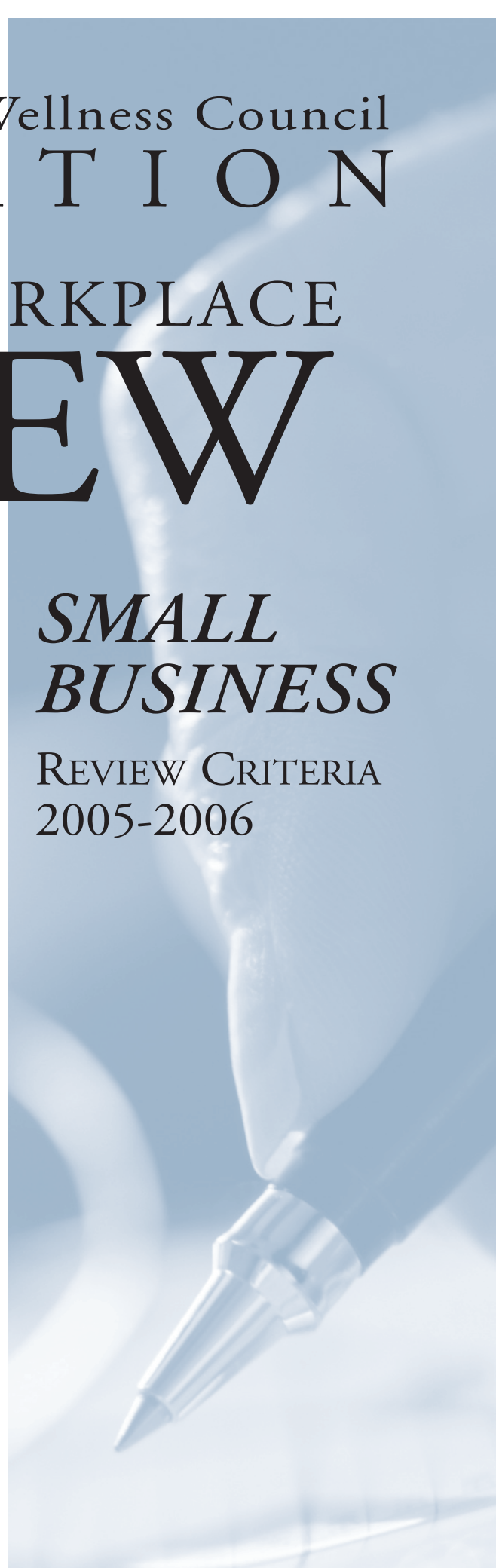


To advance an aggressive national worksite wellness agenda, WELCOA has developed the Well Workplace Awards Small Business initiative.

Developed as an important addition to the already existing Well Workplace Awards process, the Small Business initiative provides employers in organizations with 50 or fewer employees an opportunity to compete for national recognition. To be considered for a Small Business Well Workplace Award, an organization must complete the information contained in the application.

*SMALL  
BUSINESS*

REVIEW CRITERIA  
2005-2006



# WELL WORKPLACE APPLICATION REVIEW

*The Well Workplace Award - Small Business* recognizes organizations (those organizations with 50 or fewer employees) that have taken significant steps toward creating a healthier workplace for all employees and their families.

*Please Note: For all Steps, please check box if information is complete.*

## GETTING STARTED:

- Organizational Background Information Completed

### STEP 1 – CAPTURING CEO SUPPORT

- Completed Sign off from your CEO
- A bio of your CEO
- A Wellness Vision Statement from your CEO
- Wellness Leader Appointment

### STEP 2 – DESIGNATING A COMPANY WELLNESS LEADER

- A bio of Your Wellness Leader
- A copy of the Wellness Leader's Job Description
- Documentation of time dedicated to wellness

### STEP 3 – CONDUCTING AN EMPLOYEE HEALTH INTEREST SURVEY

- Summary of your company's employee interest survey results

### STEP 4 – PROVIDING AN OPPORTUNITY FOR HEALTH SCREENING

- A summary of your company's health screening offering

### STEP 5 – ADMINISTERING AN ANNUAL PHYSICAL ACTIVITY CAMPAIGN

- A completed Physical Activity Description Sheet

### STEP 6 – HOLDING A HEALTHY EATING INSERVICE/LUNCH 'N LEARN

- A completed Healthy Eating Program Description Sheet

### STEP 7 – ESTABLISHING AN INHOUSE WELLNESS LIBRARY

- A Completed Wellness Library Description Sheet

### STEP 8 – DISSEMINATING A MONTHLY HEALTH NEWSLETTER

- A copy of your organization's quarterly Health Newsletter

### STEP 9 – IMPLEMENTING HEALTHY POLICIES AND PROCEDURES

- A copy of your tobacco free workplace policy
- A copy of your alcohol/drug policy
- A copy of your seatbelt policy
- A copy of your safety/emergency procedures policy

### STEP 10 – SUPPORTING COMMUNITY HEALTH EFFORTS

- A completed community program description sheet

