

EMPLOYEE WELLNESS PROGRAM

TIER 3 WELLNESS ACTION SHEET 2009-2010

THE 7 DIMENSIONS OF WELLNESS

- Physical:** A healthy body maintained by good nutrition, regular exercise, avoiding harmful habits, making informed and responsible decisions about health, and seeking medical assistance when necessary.
- Occupational:** Preparing and making use of your gifts, skills and talents in order to gain purpose, happiness and enrichment in your life.
- Emotional:** The ability to understand your own feelings, accept your limitations, achieve emotional stability, and become comfortable with your emotions.
- Spiritual:** The sense that life is meaningful and has a purpose; the ethics, values and morals that guide us and give meaning and direction to life.
- Environmental:** The capability to live in a clean and safe environment that is not detrimental to health.
- Intellectual:** A state in which your mind is engaged in lively interaction with the world around you.
- Social:** The ability to relate well to others, both within and outside the family unit.

COMPLETING THE WELLNESS ACTIONS SHEET:

1. Review your yearly Personal Wellness Profile Results Report to identify any health risks.
2. **Complete at least 8 Activities from the different Wellness Dimensions listed below between now and April 30, 2010.**
3. Submit your completed Wellness Action Sheet to Celeste Ehrenberg, Employee Wellness Coordinator, Student Recreation and Wellness Center by April 30, 2010.

- I participated in an organized run/walk (i.e. Race for the Cure, Alumni Association Fun Run, AHA walk) between July 2009- April 2010.
 - I recorded everything I ate in a food journal for two days (one weekday, one weekend day) and submitted it for analysis.*
 - I requested and completed the Wellness Quiz #1.*
 - I requested and completed the Wellness Quiz #2.*
 - I requested and completed the two "Know your Fats" Quizzes.*
 - I had my blood pressure checked* since the health screenings and it was below 120/80.
 - I have completed a fitness assessment with Becky Wilber or Celeste Ehrenberg between July 2009- April 2010.
 - I attended the Employee Wellness Program presentation on _____.
 - I contribute at least 3% of my income to my 403b retirement fund.
 - I requested and completed the Family History Tracker.*
 - I requested and completed the Brain Teaser Puzzles.*
 - I requested and completed the How WELLthy are You? Quiz.*
 - I requested, read, and completed the Stress Balance materials and worksheet.*
 - I request, read, and completed the article and quiz on Back Safety.*
 - I have had my body fat tested* at least once since the health screenings and it was below 32% (women) or 21% (men).
 - I read my Personal Wellness Profile results and identified _____ as an area that needs improving, to improve this area I _____.
- (i.e. My overall nutrition score is an area identified needs improving, to improve this area I began eating breakfast 5 days/wk instead of one day/wk.)
*can be obtained by contacting Celeste Ehrenberg

If due to medical condition or if it is medically inadvisable for you to achieve the standards for reward under this program, email Celeste Ehrenberg at celeste.ehrenberg@washburn.edu and we will work with you to develop another way to qualify for the reward.

Choose one of the following incentives valued at \$25 for completing Tier 2 of the Employee Wellness Program

<input type="checkbox"/> 125a Cafeteria Plan	<input type="checkbox"/> Fitness Center Reimbursement:	<input type="checkbox"/> SRWC	<input type="checkbox"/> Outside Gym	<input type="checkbox"/> Bod Bucks on iCard
--	--	-------------------------------	--------------------------------------	---

I hereby attest that I completed the activities marked above.
I understand the foundation of the Employee Wellness Program is based on trust and I am accurately self-reporting my activities.

Name (print) _____ Signature _____ Date: _____