

Employee Health Interest Survey

Please help us learn more about your health interests by taking a few minutes to fill out this survey. Your responses are very important and will be kept confidential. The information will be compiled to help us plan for future wellness activities. We appreciate your input and look forward to a successful wellness program! Please return completed surveys to _____.

What is the best way for you to hear about various wellness activities?

- Flyers/posters
- Bulletin board
- Company newsletter
- Company intranet
- Paycheck attachment
- Email

When is the best time for you to participate in wellness activities?

- Before work
- Lunch hour
- Would not participate (if checked please indicate why?)
 - Lack of time
 - Lack of interest
 - Lack of motivation
- After work

Would you be interested in serving on a wellness committee?

- Yes
- No

Would you be interested in volunteering for a wellness program, health fair?

- Yes
- No

Name: _____

Phone Number: _____

Email: _____

Which of the following topics would you be interested in learning more about (check all that apply):

- Nutrition information/nutrition counseling
- Weight Watchers at Work program
- Smoking cessation
- Gym discounts/memberships
- Cancer prevention
- Stress management
- Ergonomics
- Heart health
- Asthma & allergy awareness
- Diabetes awareness
- First aid
- Better sleep
- Brain health
- Fitness/exercise
- Walking program
- Healthcare consumerism
- Corporate sports teams. Please check sports of interest:
 - Baseball
 - Basketball
 - Softball
 - Volleyball
 - Other _____
- Screenings. Please check those of interest:
 - Blood pressure
 - Cholesterol
 - Bone density
 - Body composition analysis
 - DermaScan
 - Other _____
- Employee Assistance Program (EAP)
- Other _____

Your Suggestion:

