



**TIER 3 WELLNESS ACTIONSHEET – HEALTHYBEHAVIORS**

**Directions: Engage in at least 6 behaviors listed below OR a wellness coaching option before April 28<sup>th</sup>, 2024. Once completed, email your Wellness Action Sheet to the Assistant Director of Wellness or return to the SRWC front desk.**

I currently engage in 30 minutes of moderate-intensity exercise at least 3 times a week, and have maintained this frequency for 2 months.

I currently have a fitness membership (*gym, yoga, tai chi, Jazzercise, racquetball, SRWC, etc.*) and attend at least one day a week throughout the year.

I currently eat 4 combined servings of vegetables and fruit at least 4 days a week, and have maintained this pattern for 2 months.

I completed a body composition analysis, nutrition consultation, or health coaching session during the 2023-2024 fiscal year either through the Employee Wellness Program, a health provider’s office, or a fitness facility (*Employee Wellness Program Services can be found [here](#)*).

I have volunteered for a charity, attended spiritual/religious services, or participated in art appreciation in-person (theater, museums, galleries, live music, etc.) at least 1 time each month for the last 3 months.

I contribute at least 4% of my wages to a retirement plan (outside of the 10% Washburn contributes) and/or participate in the shared leave program.

I have taken advantage of the educational assistance Washburn provides to take a class during the 2023-2024 fiscal year OR taken a class/earned a new certification outside of Washburn.

I participated in the Group Wellness classes through the Employee Wellness Program, or meet with family/friends outside of work for wellness-related activities at least once a week.

I have attended at least 3 local community and/or Washburn events \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_ (i.e. After Hours, First Friday Art Walk, Brown Bag Lecture, Wellness Fair) between July 2023 to April 2024.

I have learned a new skill, started a new hobby, or restarted an old hobby during the 2023-2024 fiscal year. Skill/Hobby: \_\_\_\_\_

I do not smoke or contacted HR to learn more about smoking and tobacco cessation resources for WU employees.

I completed an employee wellness challenge during the 2023-2024 fiscal year OR I participated in an organized walking/running or exercise event (5k, marathon, strength competition). Program/Event Name and Date: \_\_\_\_\_

I manage my stress by limiting the time I spend reading news stories or visiting social media sites to around 30 minutes or less each day.

**-----Wellness coaching option-----**

**As an alternative to Tier checklist above, participants may complete the option below for the \$50 incentive:**

BCBSKS Wellness or Disease Management (call 1-800-520-3137 for more information). Also provide certificate of completion.

*If you require accommodations to achieve the standards for this reward, please email [evelyn.spangler@washburn.edu](mailto:evelyn.spangler@washburn.edu) to develop an alternative strategy for qualifying.*

**Choose one of the following incentives, valued at \$50, for completing Tier 3 of the Employee Wellness program:**

Bod Bucks on iCard	Membership Reimbursement:	Outside Gym/Classes	125a Flex Spending
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By signing, I verify I have participated the healthy behaviors marked above and am accurately self-reporting:

Name (print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_