# WASHBURN UNIVERSITY EMPLOYEE WELLNESS PROGRAM Annual Health Screening Registration Form 2020-2021



### **Step 1: Personal Information**

**Name:			
**Email:		Campus Phone:	
**Washburn Identification Number (WIN):		**Campus Department:	
**Circle One:	I am a Washburn Employee	I am a WUF Employee	I am a WIT Employee
**Circle One:	Faculty Member (Salaried/ Paid Monthly)	Administrative Staff Member (Salaried/ Paid Monthly)	Classified Staff Member (Hourly/ Paid Bimonthly)

#### **Step 2: Health Screening Options**

Health Screenings are performed by health professionals from HealthWorks, Inc. Screenings include measurement of blood pressure, body composition, waist circumference; blood profile including lipids plus glucose; and an immediate one-on-one consultation with a health professional. Personal physician's results may be submitted in lieu of a health screening if certain criteria are met.

Choose one of the following:

□ **I plan to participate in the on campus health screening.** Employees choosing this option will schedule though an online email link ot through the Employee Wellness Program website.

OR

I plan to submit blood lipid profile results obtained by my personal physician in lieu of participating in the on campus health screening. Testing must have been conducted within the last 6 months and given to the Employee Wellness Coordinator by October 10<sup>th</sup>. Additionally, the employee will be responsible for scheduling an appointment with the Employee Wellness Coordinator to have their body composition tested.

#### **Step 3: Personal Wellness Profile Options**

The Personal Wellness Profile provides a complete health and lifestyle assessment based on the most current scientific guidelines for optimal health. You are encouraged to complete the profile online. Accommodations can be made to complete the profile via hard copy by special request. The **Personal Wellness Profile cannot be completed until after health screenings conclude.** 

Choose one of the following:

□ **I plan to complete the Personal Wellness Profile online.** Detailed instructions will be provided by the Employee Wellness Coordinator after employee's screening date.

OR

□ I plan to request a hard copy of the Personal Wellness Profile by contacting Brent Trammell at x1314 or brent.trammell@washburn.edu.

## Return completed form to Brent Trammell (web submission, email, or SRWC hardcopy) by August 28th.

\*Note: Employee must be benefits-eligible to participate in the Employee Wellness Program.

**<sup>\*\*</sup>Required**