Work Well Ambassador 2015-2016 End of Year Checklist:

Please check ☑ the programs that you completed and submit any documents by May 15, 2016

Work Well Ambassador Name: ______________________________ EMPLID: ____________________

Activities (Competition 4 qualifies you for a $10 gift card and 5 or more qualifies you for a $20 gift card)

☐ Organized an in-service/presentation. Submit sign-in sheet(s).

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☐ Volunteered for Work Well. Event/material reviewed: __________________________________________

☐ Brought a co-worker(s) to a Work Well event
   Co-worker Name(s): __________________________ Event: __________________________

☐ Coordinated a team for a Work Well campus-wide challenge or a departmental wellness activity.
   Program: _______________________________ Team Name: _______________________________

☐ Explained one Work Well program at a meeting or to another department. Submit sign-in sheet(s).

☐ Recruited another Work Well Ambassador in a department that doesn’t have one yet.
   Name(s): _______________________________ Dept.: _______________________________

☐ Met with a new employee to share about Work Well. Name of new employee: ____________________________

☐ Attended a Work Well Ambassador gathering. Mark 1: ☐ Summer gathering in 2015 and/or ☐ Bash in 2016

☐ Submitted a testimonial with photos about worksite wellness, a photo of employees doing something active/healthy, or a video of wellness at UND to Work Well.

☐ Shared healthy recipes as exchange at work or organize a healthy-potluck. Date: __________________________

☐ Did a spiritual wellness activity with co-workers, such of leaving post-its around about appreciation, encouragement or wellness messages (could be day long or more).

☐ Run a month long wellness program for your colleagues (walking, stretching, or various other ideas). Submit Sign-in sheets.

☐ Adopt a guideline from the Policy Center at: http://www.partnersforhealthgf.org/ to use in your department. Please report to Kim ASAP. Grand Forks Public Health is trying to get 10 adopted.

☐ Other idea approved by Coordinator of Work Well.

Submit to Work Well, Mail Stop 8365 by May 15th, 2016.

Updated: 8/5/2015, Saved at: S:\Wellness - Admin\Work Well\Ambassador Information\Ambassadors2015-2016\End of Year Checklist