Workplace Wellness Program Survey

Name (optional)
Email (optional)
Department
How aware are you of our current workplace wellness programs?
C Very aware C Somewhat aware C Not aware
How often do you participate in wellness activities offered?
C Regularly C Occasionally C Never
What types of wellness activities are most valuable to you? (Select all that apply)
☐ Fitness Programs ☐ Nutrition Counseling ☐ Mental Health Support ☐ Workshops/Seminars ☐ Other
How do you typically find out about wellness programs at work?
☐ Email ☐ Company Newsletter ☐ Word of Mouth ☐ Posters/Signage ☐ Other
What suggestions do you have for improving workplace wellness programs?
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Any additional comments?