Employee Wellbeing Survey

Basic Information		
Name		
Department		
Email		
Work Environment		
How satisfied are you with your current work envi		
	O 1	
	O 2 O 3	
	O 4	
	C 5	
Do you feel you have a good work-life balance?		
		•
Support and Engagement		
How supported do you feel by your manager?		
	O 1	
	C 2 C 3	
	O 4	
	O 5	
How engaged do you feel in your daily work?		
	O 1	
	O 2	
	C 3	
	O 4	
	C 5	
Open Feedback		
Do you have any suggestions to improve wellbei	ing at work?	
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