

Worksite Wellness Program Needs & Interest Survey

1. Needs and Interests Survey

Please indicate how likely you would be to participate in each of the following programs if they were offered at work during the next year. (All submissions are anonymous.)

1. How likely would you be to participate in the following health education programs:

	Extremely Likely	Likely	Somewhat Likely	Unlikely
Back Safety	jn	jn	jn	jn
Cancer Prevention	jn	jn	jn	jn
Heart Disease Prevention	jn	jn	jn	jn
Stroke Prevention	jn	jn	jn	jn
Home Safety	jn	jn	jn	jn
Cholesterol Reduction	jn	jn	jn	jn
Substance Use/Abuse	jn	jn	jn	jn
Cold/Flu Prevention & Treatment	jn	jn	jn	jn
Diabetes	jn	jn	jn	jn
Allergies/Sinus	jn	jn	jn	jn
Asthma	jn	jn	jn	jn
Immunizations	jn	jn	jn	jn
Healthy Homes (mold, radon, etc)	jn	jn	jn	jn
Head Aches/Migraines	jn	jn	jn	jn

Other (please specify)

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2. Please state how likely you would be to attend the following presentations:

	Extremely Likely	Likely	Somewhat Likely	Unlikely
Money Management	jn	jn	jn	jn
Time Management - Brain Overload	jn	jn	jn	jn
Effective Communication Skills	jn	jn	jn	jn
Identifying Personal Needs	jn	jn	jn	jn
Humor - Spiritual Healer	jn	jn	jn	jn
Balancing Work, Home and Family	jn	jn	jn	jn
Disciplining Children vs Punishment	jn	jn	jn	jn
Promoting a Healthy Lifestyle	jn	jn	jn	jn
Problem Solving and Decision - Making Skills	jn	jn	jn	jn
Healthy Leisure Lifestyle - Mash the Sofa Spud Syndrome	jn	jn	jn	jn
Healthy Relationships - Characteristics	jn	jn	jn	jn
Family Communication	jn	jn	jn	jn
Balancing Work, Home and Family	jn	jn	jn	jn
7 Habits of Highly Effective People	jn	jn	jn	jn

Other (please specify)

3. How likely would you be to participate in or utilize the following resources if they were available on-site?

	Extremely Likely	Likely	Somewhat Likely	Unlikely
Treadmill	jn	jn	jn	jn
Stationary Bike	jn	jn	jn	jn
Elliptical Machine	jn	jn	jn	jn
Circuit Training Class	jn	jn	jn	jn
Pilates Class	jn	jn	jn	jn
Yoga Class	jn	jn	jn	jn
Strength Training Stations	jn	jn	jn	jn
Stretching program	jn	jn	jn	jn
Walking program	jn	jn	jn	jn
Off-site sport league teams (volleyball, softball, etc)	jn	jn	jn	jn

Other (please specify)

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4. How likely would you be to attend the following nutrition education programs if they were offered on-site?

	Extremely Likely	Likely	Somewhat Likely	Unlikely
Healthy Cooking (meals/snacks)	jn	jn	jn	jn
Healthy Eating (do's and don'ts)	jn	jn	jn	jn
Recipe Modification	jn	jn	jn	jn
Weight Management	jn	jn	jn	jn
Food Safety	jn	jn	jn	jn

Other (please specify)

5. How likely would you be to participate in the following stress management programs if they were offered on-site?

	Extremely Likely	Likely	Somewhat Likely	Unlikely
10 Minute Massage	jn	jn	jn	jn
Organization Stress and Stress Management	jn	jn	jn	jn
Holiday Stress and Depression	jn	jn	jn	jn
Personal Stress Management	jn	jn	jn	jn
Visualization and Guided Imagery	jn	jn	jn	jn
Deep Breathing and Progressive Muscular Relaxation	jn	jn	jn	jn
Conflict Resolution	jn	jn	jn	jn
Reducing Anxiety	jn	jn	jn	jn

Other (please specify)

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6. How likely would you be to participate in the following screenings or programs if they were offered on-site?

	Extremely Likely	Likely	Somewhat Likely	Unlikely
Blood Pressure Screening	jn	jn	jn	jn
Blood Sugar Screening	jn	jn	jn	jn
Cholesterol Screening	jn	jn	jn	jn
Bone Density Screening	jn	jn	jn	jn
Flexibility Screening	jn	jn	jn	jn
Body Fat Testing	jn	jn	jn	jn
Smoking Cessation Program	jn	jn	jn	jn
Time Management Program	jn	jn	jn	jn
Card Club	jn	jn	jn	jn
Book Club	jn	jn	jn	jn
Other (please specify)	<input type="text"/>			

7. How likely would you be to participate in education sessions or fitness classes if they were offered:

	Extremely Likely	Likely	Somewhat Likely	Unlikely
Before Work	jn	jn	jn	jn
During Lunch at Work	jn	jn	jn	jn
After Work	jn	jn	jn	jn

8. How likely would you be to participate in wellness programs if you had to pay the following (Note: Prices will vary by program, class or activity):

	Extremely Likely	Likely	Somewhat Likely	Unlikely
Free	jn	jn	jn	jn
\$1.00-\$10.00	jn	jn	jn	jn
\$10.00-\$30.00	jn	jn	jn	jn
\$30.00 and above	jn	jn	jn	jn

9. Additional Comments / Suggestions

Thank you very much for your time. Your input is an important element to the success of our worksite wellness program.