

# Worksite Wellness Award



## Introduction

The *Worksite Wellness Award* is an annual recognition of an organization or business that has created a wellness culture and has supported its employees in making a commitment to improving health. With this award, The Partnership honors a specific, results-oriented, innovative program or event promoting health and wellness which is supported by the worksite/workplace. The Partnership will present the award at our annual community forum, *We're On Our Way* to be held in May.

Nominations may be made for any organization that operates within Carroll County and employs two or more people. A "large business/small business" division may be created if two equally strong nominations are made, one from each category. Organizations with less than fifty employees will be considered "small business" and organizations with fifty or more will be regarded as "large business."

Please read the entire nomination form carefully and fill out all areas completely.

**Nominations must be received by March 15** to be considered for an award to be presented at this year's *We're On Our Way* community forum.

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## I. Please provide the following information ABOUT THE NOMINEE:

Name of business / organization:

\_\_\_\_\_

Innovative program / event name: \_\_\_\_\_

Date of program origination or date of event: \_\_\_\_\_ Number of employees: \_\_\_\_\_

Person to receive acknowledgement on behalf of the business or organization:

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**II. Please describe the outstanding contribution made by this nominee:**

a. Goal(s) of innovative program / event:

b. Program / event description:

c. Innovation is a key to effective worksite wellness promotion. Please indicate the area(s) that this program or idea addresses and describe innovative aspects (check all that apply):

Health education (examples: walking program, smoking cessation, stress management)

Supportive environment (examples: formal alcohol/drug policy, no-smoking rules)

Integration of wellness program (examples: health benefits, sick leave, health brochures)

Linkage / referral (examples: employee assistance programs, nurse advice line)

Screening program (examples: flu shot, blood pressure screening)

d. Success should be measurable. How does your company/organization know this idea or effort has been effective?

e. A thriving worksite wellness program has far-reaching benefits. Describe the wider impact that this program or idea has had with employees and with the business / organization.

**III. Please complete this section ABOUT THE NOMINATOR (person completing this form):**

Name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Organizational affiliation \_\_\_\_\_

Relationship to the nominee: \_\_\_\_\_

I wish to remain anonymous:    \_\_\_yes    \_\_\_no

Signature: \_\_\_\_\_

**IV. Please attach any supporting documentation or comments on a separate sheet.**

THANK YOU for taking the time to nominate a community partner for this award. Please FAX the completed nomination form and supporting materials to The Partnership at 410-871-6325, or mail to the address below. You will receive a confirmation letter when the application has been received.

For more information, or for an electronic version of this application, please visit our web site at [www.HealthyCarroll.org](http://www.HealthyCarroll.org). You may also contact Dorothy Fox at [DLFox@CarrollHospitalCenter.org](mailto:DLFox@CarrollHospitalCenter.org) or 410-871-6373 or for additional information.

**Worksite Wellness Award**  
The Partnership for a Healthier Carroll County, Inc.  
535 Old Westminster Pike, Suite 102  
Westminster, MD 21157

**TO BE COMPLETED BY PARTNERSHIP STAFF**

Date received: \_\_\_\_\_ By: \_\_\_\_\_

Meets eligibility criteria: \_\_\_\_\_ Entered in database: \_\_\_\_\_