



Award Application

Walton Community Health Improvement Partnership

Worksite Information

Name of Worksite: Click or tap here to enter text.

Name of Preparer: Click or tap here to enter text.

City/Town: Click or tap here to enter text.

Email: Click or tap here to enter text.

Phone Number: Click or tap here to enter text.

Position Title: Click or tap here to enter text.

Policies

Check all current policies implemented at your worksite

Nutrition/Healthy Eating Policy

Tobacco-Free Environment

Other: [Click or tap here to enter](#)

Breastfeeding-Friendly

Mental Health-Friendly

Physical Activity

Flexible Dress Code

Would you like assistance in creating and implementing a new health promotion policies listed above?

Yes

No

If yes, which one(s): [Click or tap here to enter text.](#)

Environmental Supports

Check all current environmental supports implemented at your worksite

Walking Promotion Signage

Community/Worksite Garden

Breastfeeding Room

Healthy Eating Signage

Dedicated Walking Paths

Other: [Click or tap here to enter](#)

Healthy Food/Snack Bar

Bicycle Parking

Would you like assistance in creating and implementing a new health promotion environmental support listed above?

Yes

No

If yes, which one(s): [Click or tap here to enter text.](#)

Activities

Check all activities completed at your worksite since January 1, 2017

Healthy Eating/Food Challenge

Field Day

Other: [Click or tap here to enter](#)

Walking Challenge

Healthy Lunch and Learn

Employer Sponsored Health Fair

Healthy Training

Would you like assistance in creating and implementing a new health promotion activity listed above?

Yes

No

If yes, which one(s): [Click or tap here to enter text.](#)

Proof of all current policies, environmental supports, and activities indicated must be provided with the submission of this application. Proof could be documentation, pictures, etc.

Infrastructure/Systems

How many employees do you have at your worksite? Click or tap here to enter text.

Does your employer have a worksite wellness program and committee/team established?

Yes No

Has your worksite completed the CDC Worksite Health ScoreCard in the past two years?

Yes No

Does your worksite currently have a part-time or full-time position dedicated to employee health?

Yes No

Additional Comments

Award Process

Email the completed application and all supporting documentation to WCHIP@flhealth.gov.

Once the application is received, it will be reviewed and a decision will be emailed back as soon as possible. Awards will be given at the WCHIP meeting following the award decision. If a representative cannot attend the WCHIP meeting, the award can be delayed until the next WCHIP meeting.

The award levels are:

Gold Award: This award is for employers, that complete at least (1) health promotion activity or (1) environmental change or previously implemented a health promotion policy or implement a new health promotion policy.

Platinum Award: This award is for employers that complete at least (1) health promotion activity and (1) environmental change or implement a new health promotion policy.

Diamond Award: This award is for employers that complete at least (1) health promotion activity and (1) environmental change and implement a new health promotion policy and complete the CDC Worksite Health ScoreCard.



Contact:

WCHIP@flhealth.gov
850 401 6341