

My health for life Workplace Program Expression of Interest (EOI)



Your organisation

Organisation/Workplace _____

Contact person _____

Role within organisation _____

Contact phone number _____

Email Address _____

Number of employees _____

Number and location of worksites _____

Does your organisation have a workplace health and wellbeing strategy or policy?

- Yes
- No
- In development

Do you have management support to undertake workplace health and wellbeing activities?

- Yes
- No

My health for life initiative

After reading through the *My health for life* workplace information kit, would your organisation like to:

- Promote the *My health for life* online check and promote the program at your workplace
- Hold a *My health for life* health check event at your workplace
- Run the *My health for life* program at your workplace
- Staff to be referred to community group-based programs or telephone coaching

Preferred month/timeframe to commence activity _____

Alternative month to commence (if preferred is not available) _____

Healthy Workers initiative

In conjunction with identifying the health status of your workforce, would your organisation like to develop an overall strategy for work health and wellbeing?

- Yes
- No

10,000 Steps initiative

Are you happy to receive information about promoting physical activity in your workplace from 10,000 Steps?

- Yes
- No