

Our goal is always to provide you with fun and fresh wellness incentive campaigns to assist you in making meaningful lifestyle changes. To ensure we are meeting our goal, we need to hear from you. Please answer the questions below to help us understand how you felt about the program you just completed.

1. **Do you plan on using the *Fitness That Works* book more in the future? (check one)**
☐ Yes ☐ No
2. **Did you complete all 6 weeks of the *Fitness That Works* challenge? (check one)**
☐ Yes ☐ No
3. **Was the challenge easy to understand? (check one)**
☐ Yes ☐ No
4. **I found *Fitness That Works* to be (check one):**
☐ a. Not challenging enough for me.
☐ b. The right level of challenge for me.
☐ c. Too challenging for me.
5. **If the challenge was offered again would you recommend it to a coworker? (check one):**
☐ Yes ☐ No
6. **Are you more aware of your fitness habits now than you were before the *Fitness That Works* challenge? (check one):**
☐ Yes ☐ No
7. **I received these benefits by participating in the *Fitness That Works* challenge (check all that apply):**
☐ a. It was fun for me.
☐ b. I learned new things about exercise.
☐ c. I'm thinking more about changing one or more of my health habits.
☐ d. I am continuing a health behavior (exercising, etc.) that I began during the challenge.
☐ e. The program reinforced that my fitness strategies are effective.
☐ f. I enjoyed participating with coworkers.
☐ g. Other: (please specify): _____
8. **Please rate your overall satisfaction with *Fitness That Works* (check one):**
☐ Very satisfied ☐ Somewhat satisfied ☐ Somewhat dissatisfied ☐ Very dissatisfied

9. What did you like most about the *Fitness That Works* challenge?

10. What did you like least about the *Fitness That Works* challenge?

11. Please share any ideas and suggestions you have for future challenges.

**Please
return to:**

Name (optional): _____

Department (optional): _____