

Become a well@du Wellness Champion

Wellness Champion Objectives:

- Serve as a liaison between well@du and your division/department to promote program awareness and involvement among your coworkers.
- Help to cultivate a culture of wellness in the DU community and provide feedback to the Wellness Program manager.

Wellness Champion Expectations/Responsibilities:

- Attend an initial two-hour on-site champion training session with the Wellness Program manager and key partners of the well@du program.
- Attend quarterly one-hour on-site champion meetings. If you cannot attend a meeting, please send someone in your place or listen live.
- Develop an understanding and actively support well@du's goals, objectives and programs.
- Be a trusted source to collect feedback and recommendations from your department/division to share with the champion network and Wellness Program manager.
- Use your passion for health and wellness to serve as a role model and positive influence on our workplace culture. Create excitement around leading a healthy lifestyle.
- Other commitments may include communicating with the wellness manager, distribution of program materials, and/or participation in wellness programs.

Commitment as a Wellness Champion:

 We ask that you commit one year to your role as a wellness champion with the option for renewal. You will receive Wellmetrics points for your participation and are still eligible for incentives offered by the wellness program.

Application Process

- Please submit your application by February 29, 2016 to be considered for the 2016 Wellness Champion Network. Applications require a signature from your manager.
- Champions will be notified in March 2016.
- Wellness champions will be selected based on the following criteria:
 - Agreement to meet the champion expectations/responsibilities
 - Personal commitment to health and wellness
 - Commitment to supporting your department's health and well-being



2016 Wellness Champion Application

Thank you for your interest in becoming a wellness champion! Your application must be approved by your manager. Please send your completed application to well@du – Human Resources – Mary Reed Building via campus mail OR scan/email to well@du.edu by February 29, 2016.

| Name: | |
|---|---|
| Department: | |
| Email Address: | |
| Work Phone: | |
| DUID: | |
| Application Questions: | |
| Why is total well-being (phy | rsical, social, financial, mental, and community) important to you? |
| Why is supporting the wellness community at DU important to you? Why do you want to be a wellness champion? | |
| What ideas do you have to improve the overall health and wellness within your department as well as campuswide? | |
| Agreement and Signature | |
| By submitting this application, I understand that if my application is accepted, I am committing to be a wellness champion for one year. I have reviewed the wellness champion expectations and responsibilities and I agree to be a liaison and advocate for the wellness program and my department/division. I understand that I am giving permission for my name to be listed on communication materials as a wellness champion for my specific department/division. | |
| Application Signature: | |
| Applicant Name (print): | |
| Manager Approval Signature: | |
| Manager's Name (print): | |