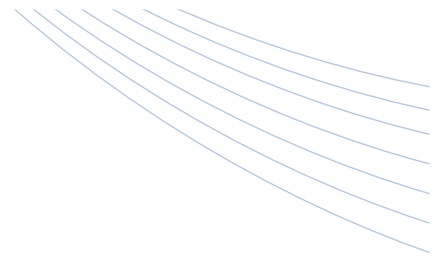




A UnitedHealthcare Company

# Get Up and Move Company Evaluation



**The challenge is over. How did it go?** Your input is valuable to us in assessing the success of our Worksite Wellness programs. Please share your company's experience using the form below.

- 1) Total number of employees: \_\_\_\_\_
- 2) Total number of participants: \_\_\_\_\_
- 3) Percentage of employees that participated: \_\_\_\_\_
- 4) Total number that completed the program: \_\_\_\_\_
- 5) Percentage of participants that completed the program: \_\_\_\_\_

6) Describe any company-sponsored activities, material adaptations, or special events that were done in conjunction with the Get Up and Move Challenge.

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7) What was the best feature of the Get Up and Move Challenge?

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8) Are there some ways the Get Up and Move Challenge could be improved?

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9) Did you use any of the incentive prize ideas/resources provided?

Yes     No

If no, why not?

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*Thank you for your feedback.*

