

City of Cupertino
Employee Wellness Program – Wellness Leave Hours
Verification Form - 2020



Employee Name: _____

Annual Medical Checkups & Tests:

- | | | |
|--|--|--|
| <input type="checkbox"/> Annual Physical = 1 hour | <input type="checkbox"/> Mammogram = 1 hour | <input type="checkbox"/> PSA test = 1 hour |
| <input type="checkbox"/> OBGYN Exam = 1 hour | <input type="checkbox"/> Blood Pressure Check within “healthy range” = ½ hour | |
| <input type="checkbox"/> Colonoscopy = 1 hour | <input type="checkbox"/> HDL/LDL Cholesterol ratio within “healthy range” = ½ hour | |
| <input type="checkbox"/> Annual Flu Vaccination = 1 Hour | <input type="checkbox"/> Glucose within “healthy range” = ½ hour | |

Annual Dental and Eye Checkups:

- Dental Visits = ½ hour for **each** dental cleaning Annual Eye Exam = 1 hour

Healthy Lifestyles:

- Participation in a formal weight loss program = **4 hours**
Weight Watchers, Jenny Craig, & Medical Weight Management Programs (through a CalPERS health plan provider)
(Please note that you may receive “Healthy Lifestyles” 4 hours OR “Employee Reimbursement” \$100 for a formal weight loss program).
- Attendance in a formal “no-smoking” program = **4 hours**
- Workout program – Workout **5 times** at a health/workout facility = **1 hour**
- Participation in a city-sponsored league with 80% attendance = **2 hours**
- Bike/walk to work – **5 times** (Log must be signed by supervisor) = **1 hour**
- “Safe House/Don’t Drive Program” - Receive \$50 if providing lodging in your home to employees who need to work late.
- Participation in Marathons, 10K, 5K, Avon Walk-Breast Cancer, Susan Komen-Breast Cancer Walk, Relay for Life-Cancer Walk, The American Heart Association - Health Walk = **2 Hours**
- Earth Day Hike 2 Miles = **1 Hour**

Healthy Lifestyles continued:

- Dance Class and competitions = **1 hour**
- Completion of a “Health Improvement/Education Programs” offered by a medical provider: Stress Management, Nutrition, and Emotional Health = **2 hours**
- Formal “No-Smoking” Program = **4 hours**

***Employee Reimbursement – Up to \$100 per Calendar Year:**

(Please note that you may receive, “Employee Reimbursement” \$100 OR “Healthy Lifestyles” 4 hours for a formal weight loss program).

- Formal “Weight Loss” Program (Weight Watchers, Jenny Craig, Nutri-Systems).
- Formal “No-Smoking” Program

Educational Awareness Efforts:

- Attendance of Brown Bag wellness topic sessions = **½ hour**

Employee #

Employee Name (Print)

Employee Signature

Date

H.R. Representative

***Wellness Leave Hours – Earn up to four (4) hours maximum
Credit for calendar year **2020** (One year carryover, use it or lose it!)***

For Human Resources Use Only

Payroll: Please add _____ hours of wellness leave.

Pay period: _____

Thank you!

Initials _____