

**BACKGROUND INFORMATION**

Name (First, Last):	Organization Name and Address (Name, Street, City, Zip Code):
Email Address:	Phone Number:
Job Title:	How many years has your wellbeing initiative been in place?

*\*Please answer the following questions to be considered as a participant in WCWI's TECH Training (maximum 150 words per question)*

*Q: What inspires you to work in the wellbeing industry?*

A:

*Q: As a leader of people and wellbeing, what do you feel matters most when it comes to creating a culture of wellbeing at your organization?*

A:

*Q: A core value of TECH is to journey with other wellbeing practitioners to co-create solutions for building more human-centric workplaces across Wisconsin. Please identify and share what you hope to learn, how you plan to connect, and what areas of professional growth you want to experience through your participation in TECH?*

- *Learn:*
  
- *Connect:*
  
- *Grow:*

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Q: Describe how you define wellbeing and your philosophy for developing strategies that will impact employee wellbeing?

A:

Please share your questions about TECH Training

\*\*\*Important things to note in regards to TECH Training:

- This group has limited capacity of ten (10) wellness professionals who manage their internal organizational wellbeing initiative.
- This group will meet virtually for six (6) trainings. Starting in April and running through September.
- The cost to participate is \$299 (Corporate WCWI Member)
- All participants in the group will have access to Continuing Education credits (\*subject to need and approval)

Please complete your application and return it to [wcwi@wellnesscouncilwi.org](mailto:wcwi@wellnesscouncilwi.org) by March 5, 2021.

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