



Mayors Wellness Campaign

Put your community in motion

Employee Information

Municipality _____ Mayor Name _____

Campaign Start _____
Date: _____

Youth Programs and Descriptions	Date	

Senior Programs and Descriptions	Date	

Please list programs that were implemented that collected outcome data.

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Community Programs and Descriptions	Date	
Employee Programs and Descriptions	Date	

Please fill out the above form and return to the Judith Doyle at the Mayors Wellness Campaign 479 West State Street, Trenton, NJ 08618 or jdoyle@njhcqi.org