



Mayors Wellness Campaign

Put your community in motion

Application for New Jersey Healthy Town Designation

| <i>Municipality information:</i> | |
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| Municipality: | |
| Mayor's name: | |
| Contact Person: | |
| Email: | |
| Address: | |
| Phone: | Fax: |
| Campaign Start Date: | |
| Youth Programs and Descriptions: | Date: |
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| Senior Programs and Descriptions: | Date: |
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| Community Programs and Descriptions: | Date: |
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| Employee Programs and Descriptions: | Date: |
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| <i>Please list programs that were implemented that collected outcome data:</i> |
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Please return this application with the designated information to elittman@njhcqi.org or
 Ms. Emily Littman, Director
 Mayors Wellness Campaign
 400 Sullivan Way
 West Trenton, NJ 08638
 Fax: 609.434.1180

****Applicants may alter the application to suit their town’s needs as long as the above information is included.**