



## WV Work It Out GRANT PROPOSAL APPLICATION

**Please make sure to read the grant guidelines and recommended suggestions before submitting the grant. All submitted WIO grants will be immediately reviewed. Please contact your HPC to notify them that you are submitting a grant.**

Today's Date: \_\_\_\_\_ Date of Health Screen: \_\_\_\_\_

Date of Operating Plan: \_\_\_\_\_ Date of Last Lifestyle Change Program: \_\_\_\_\_

Name of Last Lifestyle Change Program: \_\_\_\_\_

Worksite Name: \_\_\_\_\_ Worksite ID Number: \_\_\_\_\_

Worksite Coordinator Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

Health Promotion Consultant Name: \_\_\_\_\_

Grant History: (Circle one) New Applicant    Previous Grantee

**Please select which option is preferred.**     Option 1    **OR**     Option 2

### Option 1

- 30 Minute Fitness Assessment at Worksite
- Exercise physiologist will prepare a personalized exercise program for each participant and a copy of Yourself Fitness (computerized personal training) or other tools will be provided as appropriate for the participant's specific fitness level. Participants having access to a worksite fitness facility will not receive a tool.

A personal trainer will assist the individual with the implementation of their fitness plan if the worksite has a fitness facility.

**OR**

### Option 2

- 15 Minute Fitness Assessment at Worksite
- Exercise class with a credentialed instructor will then be made available after the initial fitness assessments have been completed.
- Classes will meet once weekly for 8 weeks at the worksite.
- Limit of 15 people per worksite
- A minimum weekly attendance of 5 individuals per exercise class is required