

HEALTHY LIVING CHALLENGE



Score Card: Week 1

NAME: _____

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total
Exercise 1 min = 1 pt								
Five 8oz glasses of water [10 pts]								
Caffeine intake <300 mg/day [10 pts]								
Workstation break [15 pts]								
5-7 servings fruit and/or veggies [20 pts]								
Try a recipe and give feedback [20 pts]								
Share your success story [50 pts]								
Team wellness photo [50 pts]	One time only during 4 week Challenge							
Book apt with wellness consultant [50 pts]	One time only during 4 week Challenge							
Book annual physical exam [75 pts]	One time only during 4 week Challenge							

Grand Total = _____

What section(s) could I improve on for next week?

HEALTHY LIVING CHALLENGE



Score Card: Week 2

NAME: _____

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total
Exercise 1 min = 1 pt								
Five 8oz glasses of water [10 pts]								
Caffeine intake <300 mg/day [10 pts]								
Workstation break [15 pts]								
5-7 servings fruit and/or veggies [20 pts]								
Try a recipe and give feedback [20 pts]								
Share your success story [50 pts]								
Team wellness photo [50 pts]	One time only during 4 week Challenge							
Book apt with wellness consultant [50 pts]	One time only during 4 week Challenge							
Book annual physical exam [75 pts]	One time only during 4 week Challenge							

Grand Total = _____

What section(s) could I improve on for next week?

HEALTHY LIVING CHALLENGE



Score Card: Week 3

NAME: _____

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total
Exercise 1 min = 1 pt								
Five 8oz glasses of water [10 pts]								
Caffeine intake <300 mg/day [10 pts]								
Workstation break [15 pts]								
5-7 servings fruit and/or veggies [20 pts]								
Try a recipe and give feedback [20 pts]								
Share your success story [50 pts]								
Team wellness photo [50 pts]	One time only during 4 week challenge							
Book apt with wellness consultant [50 pts]	One time only during 4 week challenge							
Book annual physical exam [75 pts]	One time only during 4 week challenge							

Grand Total = _____

What section(s) could I improve on for next week?

HEALTHY LIVING CHALLENGE



Score Card: Week 4

NAME: _____

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total
Exercise 1 min = 1 pt								
Five 8oz glasses of water [10 pts]								
Caffeine intake <300 mg/day [10 pts]								
Workstation break [15 pts]								
5-7 servings fruit and/or veggies [20 pts]								
Try a recipe and give feedback [20 pts]								
Share your success story [50 pts]								
Team wellness photo [50 pts]	One time only during 4 week Challenge							
Book apt with wellness consultant [50 pts]	One time only during 4 week Challenge							
Book annual physical exam [75 pts]	One time only during 4 week Challenge							

Grand Total = _____

We hope you have enjoyed this challenge. Keep up the great work!