

Worksite Qualification Form

Worksite wellness activities are funded by the United States Department of Agriculture (USDA) Supplemental Nutrition Assistance Program Education (SNAP-Ed), which helps to improve the health and well-being of qualified households and individuals by providing them with nutrition education. As such, the USDA requires that we obtain the information below from all potential worksite partners. This information is used solely for the purpose of confirming that we are serving the intended audience.

Company name: _____

Company Address: _____

1) How many employees do you have at this location?
Full-time: _____ Part-time: _____ Total employees: _____

2) A. How many of those employees make at or below \$14.05 an hour? _____

Or

B. How many employees has identified that they are on SNAP, TANF, or WIC _____

3) What type of industry is your company? (e.g., manufacturing, hotel industry, food service, agricultural)

*** By signing this form, I confirm that I am authorized to provide and verify the information provided above.** I understand that, upon the request of the SNAP-Ed funder, we may be asked to provide supporting documentation for the above information. Any salary information requested would exclude personally identifying information about employees and would remain confidential and used solely for the purpose of confirming that the SNAP-Ed services are appropriately targeted per the USDA's funding guidelines.

Name	Signature*
------	------------

Title	Date
-------	------

Thank you for your participation!

For *SNAP-Ed* use only

% of employees making at or below \$14.05 an hour	
Does this site have the minimum # of employees needed to qualify?	

This material was funded USDA's Supplemental Nutrition Assistance Program – SNAP

This institution is an equal opportunity provider.