Post-Employee Survey – Walking

Thank you for taking the employee walking survey. Please circle the answer you prefer.

1. As a result of this walking program, did you increase the amount of time you spend walking each week?
   a. Yes
   b. No
   c. Not sure/don’t know

2. Do you feel like you have accomplished your walking goal(s)?
   a. Yes
   b. No
   c. Not sure/don’t know

3. Please identify the benefits you received from the walking program (Check all that apply.)
   a. Increased energy
   b. Weight loss
   c. Reduced stress
   d. Reduced blood pressure
   e. No benefits observed
   f. Other (Write in answer):
      __________________________________________________________
      __________________________________________________________
      __________________________________________________________

4. Now that the program has ended, do you plan to continue your level of walking?
   a. Yes
   b. No
   c. Not sure/don’t know