

Sharing your **success story**

could change someone's life.

Has the ParTNers for Health Wellness Program improved your life or work in some way? Maybe you've been making healthier choices or achieved a goal? We'd love to hear your story. And there's a chance it could be featured in an upcoming email, which could positively influence other ParTNers for Health Wellness Program members.

These tips will help you put your story together.

Tell us your name and contact information.

First name, last name, email address, phone number (optional), city and state (optional).

Tell us your story with as much detail as you are comfortable sharing.

Please comment on as many of these points as possible:

- When you started participating in the ParTNers for Health Wellness Program
- What motivated you to participate
- Which aspects of the program you have taken part in? (the Well-Being Assessment, Health Screening, Health Coaching, online Well-Being Plan, Quarterly Challenges, etc.)
- Which of these you have liked the best, and why
- Goals or areas—small or big—that it's helped you work on, and how
- How you were able to work through struggles/challenges along the way
- How life and work has been different since you've been participating
- What you would say to others who are thinking of participating
- Anything else you would like us (and others) to know



When you're ready, send it our way.

You can email us your typed story with a photo(s) and/or a video story. Email us at partnersforhealth@healthways.com. Thank you and we look forward to talking with you.

www.partnersforhealthtn.gov • partnersforhealth@healthways.com • 1.888.741.3390

