

City of De Pere  
Wellness Incentive Program  
Activity/Screening Completion Form



Participant Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Email (optional): \_\_\_\_\_

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**Annual Preventive Care**

Eye Exam Date of Service: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Provider Signature: \_\_\_\_\_

PSA Date of Service: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Provider Signature: \_\_\_\_\_

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**Wellness Champion**

Provide a summary with at least 5 examples of what you did to promote wellness.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_



**To upload your Activity/Screening Completion Form:**

1. Either scan your form to a PDF or take a photo of it (Max Size: 3 MB per upload; supported file types: PDF, PNG, GIF, JPG, HEIC)
2. Log into your IH21 account at [www.ih21wellness.com](http://www.ih21wellness.com), scan the QR code with your mobile device, or download the IH21 Wellness App available in the Apple App Store and Google Play. **Please note: Do NOT upload anyone’s forms but your own when logged into your dashboard account. Spouses will need to upload their own forms to their own account.**
  - o If this is your first time logging into IH21, you will need to register as a new user. Please use company code **DePere** when registering.
3. Under the Form Uploads category, click on “Upload Form” next to the activity.
4. Click “Browse...” to locate your file, select your file, then click, “Open”.
5. Check the box to confirm the information is true to your knowledge and click “Submit”.
  - o IH21 will verify documentation submitted; please allow up to 7-10 business days.
    - IH21 may contact you with questions regarding the documentation submitted.
  - o You can verify form receipt by logging into your IH21 account. Once the document has been verified, you will see a green checkmark next to the activity and any applicable points will be awarded.



    **Wellness Champion** 

 START DATE: JAN 01, 2025  
DUE DATE: DEC 31, 2025

Provide a summary on the “Activity/Screening Completion Form” with at least 5 examples of what you did to promote wellness, for example, promoted healthy eating, educated employees on the wellness program, promoted the flu shot, etc., and upload the form. Form may take 7-10 business days to process.

**Need Assistance?** If you need assistance accessing your account or have questions about form receipt, email the IH21 team at [customerservice@integratedhealth21.com](mailto:customerservice@integratedhealth21.com) or call 800.451.6889 and they will be happy to assist you!

