



A LINCOLN ELECTRIC COMPANY

Phone: (800) 425-4657
www.wellworksforyoulogin.com

FOR WW OFFICE USE ONLY: 001JC_AP_12506

NICOTINE ATTESTATION FORM

Whether or not a nicotine user, every participant is required to complete and sign the below affidavit to certify that he or she is nicotine-free, OR a nicotine user who will complete the Wellworks For You Nicotine Cessation e-Learning Series (considered a Reasonable Alternative Standard) to qualify for the premium incentive. It is the **participant's responsibility** to submit the Nicotine Attestation Form as part of the wellness program to be returned to Wellworks For You as outlined below, by **SEPTEMBER 30, 2022**.

CONTACT INFORMATION

COMPANY NAME: Harris Products Group

FIRST NAME: _____ LAST NAME: _____

DATE OF BIRTH: _____ MALE FEMALE

PHONE: _____ EMAIL: _____

NICOTINE STATUS (PLEASE CHECK ONE)

- I **do not use** nicotine products, including cigarettes, cigars, chewing nicotine as well as electronic nicotine delivery systems such as e-cigs, vaping, or any other nicotine product and promise not to use these products during this benefit year. I understand that I may be subject to nicotine-use testing.
- I currently **use** nicotine products, but **will** be completing the Wellworks For You Nicotine Cessation e-Learning Series by **SEPTEMBER 30, 2022**.

How to Complete the Nicotine Cessation 6-week e-Learning Series:

You must login to your Wellness Portal account, select the Portal MENU option and navigate to the **E-Learning** page and select **e-LS: Nicotine Cessation**. After completing the Pre-Module Survey, Module 1 will unlock. Beginning with Module 1, you must watch each video and then complete the quiz associated with each module. You must pass each quiz with a score of 70% or above to move on to the subsequent Module. Each Module will unlock after exactly one week of passing a Module's quiz. After you complete Module 6, you must complete and save the Post-Module Survey. You must begin this program (including all quizzes and surveys) no later than **AUGUST 15, 2022** to complete the program in its entirety by **SEPTEMBER 30, 2022**.

- I currently **use** nicotine products, but **will not** be completing the Wellworks For You 6-week Nicotine Cessation e-Learning Series. **PLEASE NOTE:** You will not qualify for the incentive if you are currently using any form of nicotine, including cigarettes, cigars, e-cigs, and chewing tobacco, in any amount – even occasional social use – and choose not to participate in the Cessation Program as the Reasonable Alternative Standard.

PLEASE SIGN BELOW

I understand this is a legally binding document and I attest that the above information is accurate to the best of my knowledge. This attestation form is not complete unless I have checked a box in the Nicotine Status section that is relevant to me and have signed and dated the form below.

Signature of Participant (Required) _____ Date _____

SUBMIT YOUR COMPLETED FORMS BY SEPTEMBER 30, 2022

All forms should be submitted to the Wellworks Forms Department. Submit your completed forms in one (1) of the following ways.

- **Scan and email:** direct@wellworksforyou.com
- **Upload to Portal:** Click the **Upload a Form** tile from the homepage or via the menu page, select the event title from the dropdown and upload your form to the portal. This will be securely emailed for processing. Users are limited to **one (1)** file per email.
- **Upload to Mobile App:** Take a photo of your form using your Smartphone, and upload it to the Wellworks For You Mobile App via the **Contact Us/Send a Form** tab.
- **Mail:** 70 East Lancaster Ave, Frazer, PA 19355, Attention: Forms Department

PLEASE NOTE: Submission via email will result in an immediate confirmation that your form was received. Any other means of submission requires you to log into your wellness portal or Wellworks For You mobile app to confirm your form was processed.