

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 Tobacco Cessation e-Learning Series (considered a Reasonable Alternative Standard) to qualify for the 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, 2024**.

The form you are filling out will be scanned by a machine. To ensure that your data is uploaded accurately,

1. Use a high-quality printer to print the form.
2. Use black ink and fine-point pen.
3. Please make sure that the text on the form is clear, aligned, and legible, preferably in block letters.
4. Do not use fax or xerox copy. Do not fold or crease the form.

Check the form carefully before submitting.

CONTACT INFORMATION

COMPANY NAME: Lincoln Electric

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 6-week Tobacco Cessation Learning Series** by **SEPTEMBER 30, 2024**.
- I currently **use** nicotine products and **will not** be completing a cessation program.
NOTE: You will not qualify for the incentive if you are currently using any form of nicotine, including cigarettes, cigars, e-cigs, and chewing nicotine, in any amount – even occasional social use – and choose not to participate in the Cessation Program as the Reasonable Alternative Standard.

How to Complete the Nicotine Cessation Learning Series:

You must login to your Wellness Portal account, select the Portal **MENU** option and navigate to the **Learning Center** page and select **Your Guide to Going Tobacco Free 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 5, 2024** to complete the program in its entirety by **SEPTEMBER 30, 2024**.

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, 2024

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

- **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. Users are limited to **one (1)** file per submission.
- **Upload to Mobile App:** Tap the event that you are submitting a form under the **Home** tab. On the following screen, tap the **Select Document** button to take or upload a photo of your form. Once your form data has been captured, tap **Submit My Forms**. Users are limited to **one (1)** file per submission.

PLEASE NOTE: Wellworks For You requires at least seven (7) to ten (10) business days for processing and participation to be updated in the Wellness Portal.