

Primary Care Provider Wellness Visit Verification Form

Earn \$50 by completing your annual preventative physical!

Earn \$50 by completing your annual preventative physical visit.

Use this Wellness Visit Verification Form to be completed at your annual physical appointment.

For the Evergreen Employee:

Please submit this completed form to Evergreen Human Resources using one of the methods listed below.

Electronic:

Scan the completed form and email to esanders@EvergreenOshkosh.com.

Mail: Evergreen
Attn: Erin Sanders
1130 N Westfield Street
Oshkosh, WI 549902

Fax: 920-237-2139

Questions: Call Erin Sanders at 920.237.2132 or email esanders@EvergreenOshkosh.com.

Employee Name (Print)

Date

DOB

For the Provider:

Please sign in the signature section below of this document stating and verifying that this Evergreen employee has completed their annual wellness/physical visit.

Provider - Print Name

Date of annual physical

Provider Signature

Date signed (if different from annual physical date)

*Benefit will only be paid out once a year

