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# Wellness Release Time

BOISE STATE UNIVERSITY



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Boise State University is committed to the health and well-being of its employees. The President has authorized 60 minutes of Wellness Release Time per week for benefit eligible employees.

This time can be used during work hours for activities that contribute to the employee's health and well-being. Activities and timing of release are subject to the discretion of supervisor approval. The employee may stay on campus or provide documentation for activities or programs held off campus.

The 60 minutes can be used all at once (i.e. taking an hour class at the Rec Center or attending a counseling session) or divided up throughout the week (i.e. adding 20 minutes onto the lunch hour 3 times per week to walk or read a book for pleasure). Please consult a healthcare professional before beginning an exercise routine.

Employees are encouraged to meet with their supervisor and find a time(s) throughout the week that would work best for the employee's work schedule. The supervisor may request proof of attendance or participation in activities.

A review of the employee's usage of release time should occur annually. If an employee has a supervisory change, a meeting with the new supervisor is encouraged. This form is to be kept in the employee's personnel file.

Please review the Wellness Services website for possible release time activities and explanation of the 8 dimensions of wellness.

For questions or more information, please contact Wellness Services:  
wellness@boisestate.edu, (208) 426-2694



**BOISE STATE UNIVERSITY**

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## WELLNESS RELEASE TIME REQUEST FORM

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**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Dept.:** \_\_\_\_\_ **Ext.:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

What health and wellness activities do you plan to do during release time?

What is your proposed schedule (including days and times) of incorporating the 60 minutes of release time per week?

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor's Name (please print):** \_\_\_\_\_ **Ext.:** \_\_\_\_\_

**Supervisor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

