

## Book Reflection Form Wellness Pays Program

Name:	W#:
Title:	
Author:	
I – WHAT IS THE BOOK ABOUT?	
	LIKED <u>AND</u> DISLIKED ABOUT THE BOOK.
C.	
III — WHAT DID YOU THINK OF THE	BOOK OVERALL?
	w? If so, what?
В.	
C.	
V — WILL YOUR WELLNESS BE AFFE	CTED BY WHAT YOU READ? IF SO, HOW?