

ACTION PLAN TEMPLATE

Action Plan for: _____

Date: _____

Desired Outcome: _____

Target date for completion: _____

Resources: Time: _____

Costs: _____

People: _____

Special skills or needs: _____

Priority objectives and related tasks:

<input type="checkbox"/> 1.0	Task:	Deadline:	Person Responsible:	Budget:
<input type="checkbox"/> 1.1	_____	_____	_____	_____
<input type="checkbox"/> 1.2	_____	_____	_____	_____
<input type="checkbox"/> 1.3	_____	_____	_____	_____
<input type="checkbox"/> 1.4	_____	_____	_____	_____
<input type="checkbox"/> 1.5	_____	_____	_____	_____

<input type="checkbox"/> 2.0	Task:	Deadline:	Person Responsible:	Budget:
<input type="checkbox"/> 2.1	_____	_____	_____	_____
<input type="checkbox"/> 2.2	_____	_____	_____	_____
<input type="checkbox"/> 2.3	_____	_____	_____	_____
<input type="checkbox"/> 2.4	_____	_____	_____	_____
<input type="checkbox"/> 2.5	_____	_____	_____	_____

<input type="checkbox"/> 3.0	Task:	Deadline:	Person Responsible:	Budget:
<input type="checkbox"/> 3.1	_____	_____	_____	_____
<input type="checkbox"/> 3.2	_____	_____	_____	_____
<input type="checkbox"/> 3.3	_____	_____	_____	_____
<input type="checkbox"/> 3.4	_____	_____	_____	_____
<input type="checkbox"/> 3.5	_____	_____	_____	_____

<input type="checkbox"/> 4.0	Task:	Deadline:	Person Responsible:	Budget:
<input type="checkbox"/> 4.1	_____	_____	_____	_____
<input type="checkbox"/> 4.2	_____	_____	_____	_____
<input type="checkbox"/> 4.3	_____	_____	_____	_____
<input type="checkbox"/> 4.4	_____	_____	_____	_____
<input type="checkbox"/> 4.5	_____	_____	_____	_____

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Action Plan for: _____

<input type="checkbox"/> 5.0	Task:	Deadline:	Person Responsible:	Budget:
<input type="checkbox"/>	5.1 _____	_____	_____	_____
<input type="checkbox"/>	5.2 _____	_____	_____	_____
<input type="checkbox"/>	5.3 _____	_____	_____	_____
<input type="checkbox"/>	5.4 _____	_____	_____	_____
<input type="checkbox"/>	5.5 _____	_____	_____	_____

<input type="checkbox"/> 6.0	Task:	Deadline:	Person Responsible:	Budget:
<input type="checkbox"/>	6.1 _____	_____	_____	_____
<input type="checkbox"/>	6.2 _____	_____	_____	_____
<input type="checkbox"/>	6.3 _____	_____	_____	_____
<input type="checkbox"/>	6.4 _____	_____	_____	_____
<input type="checkbox"/>	6.5 _____	_____	_____	_____

Budget for overall project: _____

Other people, departments, or independent contractors to keep in information loop: _____

Contingency notes (if project not completed on time or within budget, what is the fallback plan?): _____

Consequences (if project not completed on time or within budget): _____

