

YOUR ORGANIZATION'S NAMEWork plan for: *Name of employee*

Year: _____

AREA OF ACTIVITY #1:		
OVERALL OBJECTIVE:		
TASKS	TIMELINE	RESOURCES
AREA OF ACTIVITY #2:		
OVERALL OBJECTIVE:		
TASKS	TIMELINE	RESOURCES
AREA OF ACTIVITY #3:		
OVERALL OBJECTIVE:		
TASKS	TIMELINE	RESOURCES