Action Plan

Add rows as necessary.

Include the Action Plan as the final part of your Program Review Report.

Action:	Term: S/M/L:	Responsible Team Member:	Date Started:	Anticipated Completion	Notes:
				Date	

Notes:

- 1. Term definitions:
 - a. S = Short, anticipated completion within one year
 - b. M=Medium, anticipated completion in more than one but less than three years
 - c. L=Long, anticipated completion in three years or more
- 2. The Responsible Team Member is the contact person for each Action