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| --- | --- | --- | --- |
| Goal: | |  | |
| Survey Items (list number & text): | |  | |
| Owner: | |  | |
| Implementation team members: | |  | |
| Brief narrative description of the initiative: | |  | |
| Budget Considerations: | Item: | | Cost: |
| Item: | | Cost: |
| Item: | | Cost: |
| Item: | | Cost: |
| Evaluation plan: | |  | Measurement date: |
|  | | | |
| Timeline for implementation task | | Owner | Deadline |
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