

Post Event Action Plan

(Please Print)

Club Name: District:

Symposium Title: Date:

Key objectives learned from symposium:

Program ideas:

Action Plan:

Goal:

Priority: Timeframe:

Step: Who is responsible: Date completed:

Action Plan:

Goal: _____

Priority: _____ Timeframe: _____

Step: _____ Who is responsible: _____ Date completed: _____

Action Plan:

Goal: _____

Priority: _____ Timeframe: _____

Step: _____ Who is responsible: _____ Date completed: _____

Action Plan:

Goal: _____

Priority: _____ Timeframe: _____

Step: _____ Who is responsible: _____ Date completed: _____
