**Action Plan**

Based upon the information received today during the workshops, list 2 concepts or points of discussion you will adapt to your work environment. Include a list of actions or steps you will implement. Be sure to list any additional resources you will need to help in the successful transition.
**DUE MONDAY, DEC. 12 BY 5 p.m.**

|  |
| --- |
| Employee Name: Date: |
| Supervisor: |
| Completion/Implementation Date: |
| Concept/Point of Discussion: |
| Specific Areas to Improve: |
| **Detailed Actions in Sequence** | **Changes to Look For** | **Resources Needed** |
| Step 1: |  |  |
| Step 2: |  |  |
| Step 3 |  |  |
| Step 4 |  |  |

Employee Signature

Supervisor Signature