

# Activity Planning Form

DATE (Today's) \_\_\_\_\_  
ACTIVITY \_\_\_\_\_  
ACTIVITY DATE \_\_\_\_\_

## THINGS TO

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## ASSIGNED TO:

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## FOLLOW-UP

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## THINGS NEEDED

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## ASSIGNED TO:

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## FOLLOW-UP

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COST OF ACTIVITY \_\_\_\_\_  
TRANSPORTATION \_\_\_\_\_  
CLEAN-UP \_\_\_\_\_

PROBLEMS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SOLUTIONS \_\_\_\_\_  
\_\_\_\_\_  
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Was the activity successful? \_\_\_\_\_

What went well? \_\_\_\_\_

What went wrong? \_\_\_\_\_

What improvements can be made? \_\_\_\_\_

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COMMENTS \_\_\_\_\_

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