



CENTER FOR COMMUNITY PARTNERSHIPS

Goal Setting & Planning Worksheet

Organization name: _____

Contact person (Name of person filling out the form)

Purpose of Project/Partnership:			
Objective/Core Questions of Project:			
Overall Goal(s) of Project	Objectives	Activities	
		1	
		2	
			3
			1
			2
			3
			1
			2
			3
			1
			2
		3	
		1	
		2	
		3	

Goal Tracking Notes: *What indicators will you use to measure progress toward your goals? How and when will you reassess the goals of your project? How will you know when you have met your goal? What happens if your goals are met sooner than expected? What happens if the goals of the project are not met?*