# Youth Advocates for Community Health Project Action Plan Template

## General Information

**Project Name:**

**Names and contact information of youth and adult participants:**

**Youth Participants:**

**Adult Participants:**

##  Project Abstract

1. Describe community need/issue. Include a brief explanation for how you arrived at this issue compared to others considered.

2. Describe the programs and activities that you plan to develop and implement.

 3. Describe how the idea for this project was developed.

4. What community issue does your project address? Describe how the project will improve health, promote physical activity, or promote healthy eating behaviors.

5. What steps (activities) will be done to address the problem.

6. Briefly describe what you expect to accomplish. Describe how you will measure success in addressing the issue.

7. Describe who and how many people will benefit from your project.

## Situation

|  |  |
| --- | --- |
| **Initiative Title:**  |  |
| **Start – End Dates:**  |  |
| **Community**   | *What community will this project serve?*  *How are you defining that community?*   |
| **Community Assets**  | *What is special about your community?* *What is it important to you that people living your community are healthy and well?* *Who are your allies?*  |
| **Initiative Goal(s) Statement:**  | *What does the initiative hope to achieve, overall?*  *What is the youth niche in this issue? What will youth contribute to this effort that no adult has or could do?*  |
| **What do you want to achieve?**  **(S.M.A.R.T. Goals)**  |   |
| **Notes? (Money, Staff, Partners, Volunteers, Supplies)**  | *When you’re gathering information about your community, issue, and actions, you may want to record notes here that don’t have a ‘home’ or use to you yet.*   |

## Action Plan

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Activities you will do to achieve your goal.**   | **Team Member(s) responsible** | **Resources Needed** (Money, Staff, Volunteers, Supplies)  | **Deadline** (when will you complete the activity?)  | **Outcomes** (short-, medium-, or long-term)  | **Evaluation** (how will you measure short-/medium-term outcomes?)  |
| **S.M.A.R.T. Goal 1:**   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
| **S.M.A.R.T. Goal 2:**   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
| **S.M.A.R.T. Goal 3:**   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |

## Program Budget

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item**   | **Quantity**  | **Purpose**  | **Cost per Item**  | **Total Cost**  |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
| **Total:**  |   |

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