

## Strategy/Action Status Report Form

Strategy/Action: \_\_\_\_\_

Scheduled Start/Completion Date(s): \_\_\_\_\_

Strategy/Task (Team) Leader: \_\_\_\_\_

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Status as of \_\_\_\_\_

\_\_\_ Completed      Date \_\_\_\_\_

\_\_\_ Underway      % complete \_\_\_\_\_ Estimated completion date \_\_\_\_\_

\_\_\_ Not started      Explanation \_\_\_\_\_

1. What has gone well?

2. What challenges or difficulties are being encountered?

3. What assistance do you need?

4. Other experience or feedback useful to the planning or implementation process: