

Plan of Work Worksheet

Primary Event Information

Chairperson _____

Contact Information _____

Activity _____

Date _____

Location _____

Time _____

Appointed Committee Members

Name

Contact Information

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

Check When Completed

- | | | |
|---|--|---|
| <input type="checkbox"/> OK with insurance | <input type="checkbox"/> Volunteers confirmed | <input type="checkbox"/> Publicity materials |
| <input type="checkbox"/> Received staff input | <input type="checkbox"/> Parking logistics | <input type="checkbox"/> Developed |
| <input type="checkbox"/> Hospitality arranged | <input type="checkbox"/> Signage | <input type="checkbox"/> Duplicated |
| <input type="checkbox"/> Parental permission slip | <input type="checkbox"/> Crossing guards | <input type="checkbox"/> Letters/flyers to parents & staff |
| <input type="checkbox"/> Developed | <input type="checkbox"/> Special requirements | <input type="checkbox"/> PTA newsletter distributed |
| <input type="checkbox"/> Duplicated | <input type="checkbox"/> Flag | <input type="checkbox"/> Press releases and/or Public Service Announcements (PSAs) to media |
| <input type="checkbox"/> Distributed | <input type="checkbox"/> Judges | |
| <input type="checkbox"/> Evaluation form(s) | <input type="checkbox"/> Custodian | |
| <input type="checkbox"/> Developed | <input type="checkbox"/> Program approved by unit | |
| <input type="checkbox"/> Duplicated | <input type="checkbox"/> Funds allocated by unit | |
| <input type="checkbox"/> OK with PTA budget | <input type="checkbox"/> Handouts collected from non-participating service providers | |
| <input type="checkbox"/> OK with school calendar | | |

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Program Expenses

Facility Use permit \$	Custodian \$	Refreshments \$
Flyers \$	Handouts \$	Signs \$
Postage \$	Nametags \$	\$

Publicity

Flyers	Deadline	Newsletter articles	Deadline	Media releases	Deadline

Equipment & Audiovisual Requirements

Item	Quantity	Location	Item	Quantity	Location

Special Contacts (judges, speakers, service providers)

Name	Contact Information
1.	
2.	
3.	
4.	

Notes
