

## Project Planning Worksheet

Use this form to help you plan your service project.

Agency/School: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Time: \_\_\_\_\_

### Contacts

Hands On Network	Volunteer Leader	Agency/School
Name: _____	_____	_____
Phone: _____	_____	_____
e-mail: _____	_____	_____

If you will be using project task leaders to lead smaller groups of volunteers during your project, note their contact information here:

Task Leader 1	Task Leader 2	Task Leader 3
Name: _____	_____	_____
Phone: _____	_____	_____
e-mail: _____	_____	_____
Task Leader 4	Task Leader 5	Task Leader 6
Name: _____	_____	_____
Phone: _____	_____	_____
e-mail: _____	_____	_____

### Project Details

Briefly describe the project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is prep work needed? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what is needed? \_\_\_\_\_

Who will do the prep work? \_\_\_\_\_

Is this a one-day project? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, when will it continue? \_\_\_\_\_

## Contingency Plans

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Briefly describe back-up projects: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How can this project (or parts of the project) proceed in the event of rain?

\_\_\_\_\_

Are other events or projects occurring on-site that day? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what is the impact on this project? \_\_\_\_\_

## Safety

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Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Briefly describe safety/emergency plan: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Volunteer Information

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# Volunteers needed: \_\_\_\_\_ Minimum age: \_\_\_\_\_

Things to bring or wear: \_\_\_\_\_

Are food and beverages provided? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, who will provide? \_\_\_\_\_

Does the project site have restroom facilities? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, describe alternative: \_\_\_\_\_

Is the project site accessible for persons with disabilities? Yes \_\_\_\_\_ No \_\_\_\_\_

How will volunteers pre-register? \_\_\_\_\_

Whom should volunteers contact with questions before the event? \_\_\_\_\_

Provide detailed driving/public transit directions to the project site: \_\_\_\_\_

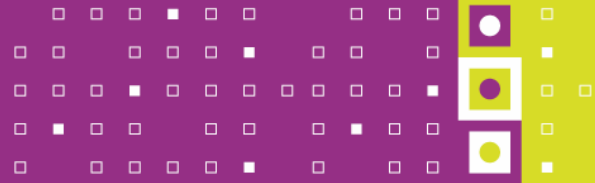
\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What time should volunteers arrive? \_\_\_\_\_

Where should volunteers park? \_\_\_\_\_



## Project Task List

List each task involved in completing the service project. Be specific! Determine the number of volunteers needed for each task, the time required, and the priority in which the tasks should be completed.

Project: \_\_\_\_\_

Location \_\_\_\_\_ Date: \_\_\_\_\_

### Contacts

	Hands On Network	Volunteer Leader	Agency/School
Name:	_____	_____	_____
Phone:	_____	_____	_____
e-mail:	_____	_____	_____

### Tasks

Priority	Task	Time Required	# Volunteers Required





## Project Supply List

List each item you will need for your project and its purpose. Note the quantity needed. If it will be donated, identify the donor. If you will purchase the item, record the purchase price. Be as thorough as possible.

Project: \_\_\_\_\_

Location \_\_\_\_\_ Date: \_\_\_\_\_

### Contacts

Hands On Network

Volunteer Leader

Agency

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

e-mail: \_\_\_\_\_

### Supplies

Description	Purpose	Qty.	Donor	Price



