

**Strategic Prevention Framework State Incentive Grant (SPF SIG)**  
**Capacity Work Plan (page 1)**

**Coalition/Agency:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Person completing this form:** \_\_\_\_\_ **Phone/Email** \_\_\_\_\_

**\*In the status box, check if a task is completed and skip the rest of the row. If the task is NOT completed, note plans to address the task and complete the row.**

<b>Task</b>	<b>Status*</b> (Check if completed)	<b>Plans to address:</b> (If task is not checked "completed" at left)	<b>Person Responsible</b>	<b>Anticipated Completion Date</b>	<b>Justification</b> (if after 10/1/09)
<b>Identifying and Recruiting Coalition Members</b>					
Develop a directory of key stakeholders, leaders and service providers.					
Conduct Community Mapping					
<b>Coalition Infrastructure</b>					
Develop/Review Organizational Chart					
Develop/Review Coalition By-Laws or Guiding Principles					
Membership Agreements					
MOUs (note which are present/which are needed)					
Job Descriptions (note which are present/which are needed)					

**Strategic Prevention Framework State Incentive Grant (SPF SIG)  
Capacity Work Plan (page 2)**

**Coalition/Agency:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Person completing this form:** \_\_\_\_\_ **Phone/Email** \_\_\_\_\_

**\*In the status box, check if a task is completed and skip the rest of the row. If the task is NOT completed, note plans to address the task and complete the row.**

<b>Task</b>	<b>Status*</b> (Check if completed)	<b>Plans to address:</b> (If task is not checked "completed" at left)	<b>Person Responsible</b>	<b>Anticipated Completion Date</b>	<b>Justification</b> (if after 10/1/09)
<b>Sustainability</b>					
Develop/ Review Sustainability Plan					
Develop/Review Vision Statement					
Develop/Review Mission Statement					
Determine Coalition Leadership Needs					
<b>Community Readiness</b>					
Conduct Community Readiness Interviews					
Conduct Coalition Readiness Survey					

