

Internal Organizing Campaign Plan for Local _____

Worksite/Location:
Current Number of Employees:
Overall Plan Goals:
Campaign Timeline:

Number of Locations:
Current Number of Members:

1. Goal:

| What needs to be done | Who is responsible | By what date |
|-----------------------|--------------------|--------------|
| | | |

2. Goal:

| What needs to be done | Who is responsible | By what date |
|-----------------------|--------------------|--------------|
| | | |

3. Goal:

| What needs to be done | Who is responsible | By what date |
|-----------------------|--------------------|--------------|
| | | |

4. Summary of results for this month.

5. Issues and next month's plan.

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|--|---|
| | <p>Issues:</p> <p>Next Steps:</p> |
|--|---|

Report Date: _____ **Person Completing Report:** _____