

PLANNING OUTLINE FORM

Child's Name: _____
Participant(s): _____
Family Members: _____
Location of Activity(s): _____
Time: Begin: _____ End: _____ Miles Driven: _____
Date: _____
Meeting #: _____

Purpose of Meeting: (To be developed during the previous meeting)

Agenda: (To be developed during the previous meeting)

Resources Needed: (To be developed during the previous meeting)

Proposed Outcome(s): (To be developed during the previous meeting)

Review/Feedback/Lessons Learned: (To be solicited at the end of the current meeting.)

