

**INDIVIDUAL WORK PLAN**

From – to

Name of Employee:

Position:

Section/ Division:

	<b>TASKS TO BE PERFORMED</b>	<b>INCLUSIVE DATES</b>	<b>EXPECTED OUTPUT</b>
1			
2			

Prepared by:

Approved by:

Name  
Position

Name  
Position

**ACCOMPLISHMENT REPORT**

*Applicable Week*

Name of Employee:

Position:

Section/ Division:

	<b>TASKS TO BE PERFORMED</b>	<b>INCLUSIVE DATES</b>	<b>EXPECTED OUTPUT</b>	<b>ACTUAL OUTPUT</b>
1				
2				
3				

Prepared by:

Approved by:

Name  
Position

Immediate supervisor