

REPORTING WORK PLAN

REPORT IS FOR:	HOW OFTEN OR WHEN	STAFF RESPONSIBLE FOR REPORT	WHAT SOFTWARE IS NEEDED	TYPES OF ANALYSIS OR DATA	QUESTION(S)/ OUTCOME(S) TO ANSWER/ ADDRESS	PREFERRED DATA VISUALIZATION	RELATES IMPACT GOAL(S)
BOARD	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Other (specify):			<input type="checkbox"/> Qualitative/ Narrative <input type="checkbox"/> Quantitative <input type="checkbox"/> Descriptive <input type="checkbox"/> Comparison <input type="checkbox"/> Other (specify):		<input type="checkbox"/> Charts/Graphs <input type="checkbox"/> #'s and %'s <input type="checkbox"/> Stories <input type="checkbox"/> Pictures <input type="checkbox"/> Other (specify):	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
STAFF/ INTERNAL	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Other (specify):			<input type="checkbox"/> Qualitative/ Narrative <input type="checkbox"/> Quantitative <input type="checkbox"/> Descriptive <input type="checkbox"/> Comparison <input type="checkbox"/> Other (specify):		<input type="checkbox"/> Charts/Graphs <input type="checkbox"/> #'s and %'s <input type="checkbox"/> Stories <input type="checkbox"/> Pictures <input type="checkbox"/> Other (specify):	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
GENERAL PUBLIC	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Other (specify):			<input type="checkbox"/> Qualitative/ Narrative <input type="checkbox"/> Quantitative <input type="checkbox"/> Descriptive <input type="checkbox"/> Comparison <input type="checkbox"/> Other (specify):		<input type="checkbox"/> Charts/Graphs <input type="checkbox"/> #'s and %'s <input type="checkbox"/> Stories <input type="checkbox"/> Pictures <input type="checkbox"/> Other (specify):	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3

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FUNDER 1:	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Other (specify):			<input type="checkbox"/> Qualitative/ Narrative <input type="checkbox"/> Quantitative <input type="checkbox"/> Descriptive <input type="checkbox"/> Comparison <input type="checkbox"/> Other (specify):		<input type="checkbox"/> Charts/Graphs <input type="checkbox"/> #'s and %'s <input type="checkbox"/> Stories <input type="checkbox"/> Pictures <input type="checkbox"/> Other (specify):	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
FUNDER 2:	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Other (specify):			<input type="checkbox"/> Qualitative/ Narrative <input type="checkbox"/> Quantitative <input type="checkbox"/> Descriptive <input type="checkbox"/> Comparison <input type="checkbox"/> Other (specify):		<input type="checkbox"/> Charts/Graphs <input type="checkbox"/> #'s and %'s <input type="checkbox"/> Stories <input type="checkbox"/> Pictures <input type="checkbox"/> Other (specify):	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
FUNDER 3:	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Other (specify):			<input type="checkbox"/> Qualitative/ Narrative <input type="checkbox"/> Quantitative <input type="checkbox"/> Descriptive <input type="checkbox"/> Comparison <input type="checkbox"/> Other (specify):		<input type="checkbox"/> Charts/Graphs <input type="checkbox"/> #'s and %'s <input type="checkbox"/> Stories <input type="checkbox"/> Pictures <input type="checkbox"/> Other (specify):	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4