[COMPANY LOGO]

Employee Action Plan

Name: Date:

Position:

Daily Availability:

|  |  |
| --- | --- |
| Monday |  |
| Tuesday |  |
| Wednesday |  |
| Thursday |  |
| Friday |  |

Work Priorities and Timelines:

The following at the high-priority work responsibilities and expected timelines for addressing them that were agreed upon by myself and my supervisor.

**Priority 1:** [Insert Description]

**Priority 2:** [Insert Description]

**Priority 3:** [Insert Description]

Communication Plan:

**Frequency:** My supervisor and I agree to engage with each other on a **daily** basis to discuss updates in availability, priorities, and timelines.

Communication Format: [Describe whether the communication will be over the phone, via text, via video, or physical check-in]

Other Known Issues:

[Insert other topics that can be addressed that will be known to cause an issue. Ex. Back-up care for children, schedule conflicts with spouse]

Employee Signature: Date:

Supervisor Signature: Date: