



## Section E: FY \_\_\_\_\_ Performance by Initiative Plan

### I. Strategic Alignment

Staff Member:	Staff ID	Title
Department	Supervisor	Senior Reviewer
Performance Summary Period: _____ to _____		Date/Initial of Plan Review(s)

**Applicable University of Houston Strategic Initiative(s):**

**Applicable College/Divisional/Departmental Strategic Initiative(s):**

**Applicable Unit/Staff Person's Initiative(s):**

## II. Performance by Initiatives

1.	%FTE	Strategic Initiative/Goals	Key Partners/Beneficiaries
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<b>Activities</b>			
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<b>Measurements/Performance Standards</b>			
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<b>Results</b>			
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<b>Coaching/Feedback Notes <i>(Date and initial each entry)</i></b>			
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2.	%FTE	Strategic Initiative/Goals	Key Partners/Beneficiaries
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<b>Activities</b>			
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<b>Measurements/Performance Standards</b>			
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<b>Results</b>			
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<b>Coaching/Feedback Notes <i>(Date and initial each entry)</i></b>			
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## II. Performance by Initiatives (con't)

3.	%FTE	Strategic Initiative/Goals	Key Partners/Beneficiaries
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Activities			
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Measurements/Performance Standards			
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Results			
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Coaching/Feedback Notes <i>(Date and initial each entry)</i>			
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4.	%FTE	Strategic Initiative/Goals	Key Partners/Beneficiaries
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Activities			
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Measurements/Performance Standards			
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Results			
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Coaching/Feedback Notes <i>(Date and initial each entry)</i>			
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## II. Performance by Initiatives (con't)

5.	%FTE	Strategic Initiative/Goals	Key Partners/Beneficiaries
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Activities			
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Measurements/Performance Standards			
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Results			
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Coaching/Feedback Notes <i>(Date and initial each entry)</i>			
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6.	%FTE	Strategic Initiative/Goals	Key Partners/Beneficiaries
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Activities			
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Measurements/Performance Standards			
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Results			
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Coaching/Feedback Notes <i>(Date and initial each entry)</i>			
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