Instructions**:** Complete the following form and submit to your Regional Point of Contact by June 30, 2025. This activity will be worked on in budget periods (BP) 2-5.

This year, BP1, in addition to the activity, provide outcomes and/or outputs from the activities.

* Outputs – the tangible results specific to the activity, such as a plan, exercise, etc.
* Outcomes – are the impact or value created by the outputs.

Minimally, each local health department needs to submit at least one activity; it is strongly encouraged to provide one for the local health department and one regional activity.

Progress reporting for the activity(s) is due with mid and end of year reporting beginning in BP2.

## To Complete:

### Activity 1

|  |  |
| --- | --- |
| Name: |  |
| Activity/Description: |  |
| Anticipated Outcomes/Outputs: |  |
| Associated Capabilities / Strategies: |  |
| Start Date: |  |
| Projected Completion Date: |  |

### Activity 2

|  |  |
| --- | --- |
| Name: |  |
| Activity/Description: |  |
| Anticipated Outcomes/Outputs: |  |
| Associated Capabilities / Strategies: |  |
| Start Date: |  |
| Projected Completion Date: |  |

*Please add more activities as needed.*

### Activity #

|  |  |
| --- | --- |
| Name: |  |
| Activity/Description: |  |
| Anticipated Outcomes/Outputs: |  |
| Associated Capabilities / Strategies: |  |
| Start Date: |  |
| Projected Completion Date: |  |