Fiscal Year: 2017-2018

 **Planning Stage:**

Please complete an annual objective for each category in the spaces provided.

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| **Agency:** -Select Agency Name - |
| **Agency Head:** (Enter Agency Head Name) |

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| **Mission Statement:** (Briefly summarize the mission of the agency) |
| (Enter Agency Mission Statement) |
| **Objective 1: Leadership**The Leadership objective examines how the agency head guides and sustains the organization, setting organizational vision, values, and performance expectations. |
| (Enter Objective 1 Text) |
| **Objective 2: Strategic Planning**The Strategic Planning objective examines how the agency head develops strategic objectives and actionplans, the implementation of the plans, how plans are changed if circumstances require a change, and how accomplishments are measured and sustained. |
| (Enter Objective 2 Text) |
| **Objective 3: Customer Focus** The Customer Focus objective examines how the agency head determines who the agency customers are, the requirements, needs and expectations of those customers, and the satisfaction of those customers. |
| (Enter Objective 3 Text) |
| **Objective 4: Workforce Focus / Human Resources**The Workforce Focus/Human Resources objective examines how the agency head ensures theperformance, management, and development of the workforce to utilize its full potential in accomplishing theorganization's overall mission, strategy, and agency goals. |
| (Enter Objective 4 Text) |
| **Objective 5: Process Management / Continuous Improvement** The Process Management/Continuous Improvement examines how the agency head continuously works toimprove the agency work process and improves its work process to deliver organizational success. |
| (Enter Objective 5 Text) |
| **Objective 6: Financial Management**The Financial Management objective examines how the agency head manages the budget, manages audit results, and determines priorities for the expenditure of funds to achieve agency short- and long-term organizational goals.  |
| (Enter Objective 6 Text) |

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| **Planning Stage Verification** |
| **Agency Head:**Signature:Date: **Governor or Board/Commission Chair:**Signature:Date: |