

Action Plan Worksheet

Date: _____

Evaluator: _____

Unit: _____

GM: _____

Plans

(What are the details to make it happen?)

DETAILS

RESPONSIBILITY

DATE DUE

FOLLOW-UP

Follow-Up Discussions

EVALUATOR

DATE

MANAGER ON DUTY

I have reviewed and understand our
restaurant's Action Plan

SIGNATURE

DATE

GM

SL

SL

SL

SL

SL

SL