**Program Strategy**

*Overview:*

|  |  |
| --- | --- |
| **Program Name:** |  |
| Current Impact Assessment | Contribution to Intended Impact | Excellence in Education | Criteria 3 | Criteria 4 | Current Mission Impact Score |
|  |  |  |  |  |
|  |  |
| Current Finances | Revenue | Expenses | Profitability |
|  |  |  |
|  |  |  |  |  |  |
| Current Matrix Map Quadrant |  |
| Desired Matrix Map Quadrant |  |

**Strategy, prioritized, with most important first**

|  |  |  |  |
| --- | --- | --- | --- |
| **Strategy** | **Resources Needed** | **Implications on Impact / Finances** | **Priority:** **Org. or Program** |
|  |  |  |  |
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**Is there anything that you should stop doing?**

|  |  |  |
| --- | --- | --- |
| **Activity** | **Implications** | **Resources Released** |
|  |  |  |
|  |  |  |