

# Effective Delegation Planning Sheet

Volunteer Name: \_\_\_\_\_

Tasks to Delegate:

1. Task: \_\_\_\_\_

- Current Proficiency (Low / Some / Good / Excellent):  
\_\_\_\_\_
- Delegation Level (Ask and Recommend / Act and Report Immediately / Act and Report Periodically / Act on Own): \_\_\_\_\_
- Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Task: \_\_\_\_\_

- Current Proficiency (Low / Some / Good / Excellent):  
\_\_\_\_\_
- Delegation Level (Ask and Recommend / Act and Report Immediately / Act and Report Periodically / Act on Own): \_\_\_\_\_
- Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Task: \_\_\_\_\_

- Current Proficiency (Low / Some / Good / Excellent):  
\_\_\_\_\_
- Delegation Level (Ask and Recommend / Act and Report Immediately / Act and Report Periodically / Act on Own): \_\_\_\_\_
- Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Next Review Date: \_\_\_\_\_

Leader Notes:

---

---