

Planning Sheet

Name _____ Date _____

Project _____

Your Turn Complete this sheet in order to plan a project. (See *Inquire* page 350 for an example.)

Goal: _____

Objectives: Who? _____

What? _____

Where? _____

When? _____

Why? _____

How? _____

Tasks:

Time:

- | | |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |
| 6. _____ | _____ |
| 7. _____ | _____ |
| 8. _____ | _____ |

Team: _____

Tools:

Equipment: _____

Materials: _____

Information: _____

Resources: _____