	12 4 2			
FACIL	HAII	ION P	LANN	ING

Facilitation name/title					
Date	Time	Total duration			
Location					
STATEMENT OF PURPOSE					
Goals for the facilitation	Goals for the organization	Goals for myself			
What are the next steps after the facilitation?  PARTICIPANTS/AUDIENCE					
Who do I know is coming?		What is the dynamic of this group?			
		Is there a leader? Who?			
How do I want my audience to <b>feel</b> (	during this facilitation?				
What do I want them to <b>do</b> after this facilitation?					
MENTAL PREPARATION					
What are my concerns, and what can I bring to overcome them?					

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