**ADAD Prevention Services**

**Strategic Plan Template**

**ASO Log No.:**

**Contract Year:**

**Date:**

**Agency Name:**

**Contact Person & E-mail:**

**Program or Policy Name:**

1. **Executive Summary**
2. **Community Needs Assessment**
3. **Capacity**
4. **Planning Process**
5. **Logic Model**
6. **Action Plan**
7. **Adaptations**
8. **Evaluation Plan**
9. **Updating the Strategic Plan**
10. **Appendix (if any)**