

SAMPLE Continuity Plan

| | | | |
|---|--------------------------|---------------------|------------------------|
| Position Title | Insert Employee Name | Last Updated | Last Updated |
| Pay Plan, Series & Grade | Insert Employee Position | Supervisor | Insert Supervisor Name |
| Position Description: Primary responsibilities | | | |
| Position Qualifications: List minimum qualifications to perform the duties | | | |
| Position Responsibilities: | | | |
| Tasks: Describe tasks and frequencies Note: For recurring tasks, document each task by listing the specific steps to complete the task including paper and electronic processes. List other employees who are responsible for various parts of the task | | | |
| Recurring Meetings: Record the meeting title, day and time, meeting point of contact with roles and responsibility involved in the meeting | | | |
| Automated Computer Systems Documentation If automated computer systems are required for the position, document the name of the systems, the purpose of the system, who uses the system and how they use it, who owns the data (who is the manager in charge of the data), the technical contact, user permissions and the application and data sources that the system uses | | | |
| Business Contacts List all business contacts and the purpose of the relationship | | | |

SAMPLE Continuity Plan

| Transition Activities for Deployment (Overseen by Supervisor) | Completion Date | Comments |
|---|--------------------|----------|
| Identify relevant business issues | | |
| Identify projects, initiatives and tasks | | |
| List direct reports, if applicable | | |
| Provide location of documents and records addressed | | |
| Key contact information | | |
| Identify current team members | | |
| Discuss training requirements for position | | |
| Determine staff notification of temporary position, if applicable | | |
| Notify IT/Facilities of access changes | | |
| [Insert other activity] | | |

Continuity Plan Discussion

Supervisor

Supervisor Name, Title and Organization

Supervisor Signature Date

Employee

Employee Name, Title and Organization

Employee Signature Date