

PBS Team Meeting Record

Print Clearly in Ink

Location: _____ Time: _____ Date: ____/____/____

Attach PBS Team Meeting Sign-In Sheet

Report on items from previous meeting: (check that previously assigned tasks were completed):

Celebrations to report:

Team Announcements:

Office Discipline Data Reviewed: (check one) yes or no If not, why?

Issue/Task/Item Discussed:

Action Step:

Person(s) Responsible (if applicable):
Date to be Completed:

Issue/Task/Item Discussed:

Action Step:

Person(s) Responsible (if applicable):
Date to be Completed:

Issue/Task/Item Discussed:

Action Step:

Person(s) Responsible (if applicable):
Date to be Completed:

Issue/Task/Item Discussed:

Action Step:

Person(s) Responsible (if applicable):
Date to be Completed:

Carryover Items/Issue/Task to be discussed at next meeting:

Any additional notes:

Next Meeting Information:

Location _____ Time: _____ Date: ____/____/____