

**French Language Services (FLS)**  
**Annual Operating Plan**  
*Template*

**January 2018**

**FRENCH-LANGUAGE SERVICES (FLS)  
ANNUAL OPERATING PLAN**

Public Body \_\_\_\_\_

FLS Coordinator \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

**1. COMPOSITION OF FRENCH-LANGUAGE SERVICES (FLS) COMMITTEE**

**MEMBERS OF THE FLS COMMITTEE**

| Name | Position |
|------|----------|
|      |          |
|      |          |
|      |          |
|      |          |
|      |          |
|      |          |

## 2. THE FRENCH-LANGUAGE SERVICES (FLS) ANNUAL OPERATING PLAN

| Key Result Area | Work to be Completed | Action Steps | Key Performance Indicator(s)<br>(Output) | Measurable Statement(s)<br>(Outcome) | Timeline |
|-----------------|----------------------|--------------|--|--------------------------------------|----------|
|                 |                      | •            |  |                                      | •        |
|                 |                      | •            |  |                                      | •        |
|                 |                      | •            |  |                                      | •        |
|                 |                      | •            |  |                                      | •        |

**3. APPROVAL OF THE FRENCH-LANGUAGE SERVICES (FLS) ANNUAL OPERATING PLAN**

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Deputy Minister / Chief Executive Officer

Date

**4. EVALUATION OF THE PRECEDING FISCAL YEAR'S FRENCH-LANGUAGE SERVICES (FLS) OPERATING PLAN**

For each of the work areas to be completed in your FLS Annual Operating Plan please indicate the corresponding initiatives or actions as set out in the FLS Annual Operating Plan, the expected outcomes and the achieved outcomes. The table may be added to as required.

|                              |   |                                 |
|------------------------------|---|---------------------------------|
| <b>WORK TO BE COMPLETED:</b> |   |                                 |
| <b><i>ACTION STEPS</i></b>   | <b><i>MEASURABLE STATEMENTS (EXPECTED OUTCOMES)</i></b> | <b><i>ACHIEVED OUTCOMES</i></b> |
| •                            | •   | •                               |
| <b>WORK TO BE COMPLETED:</b> |   |                                 |
| <b><i>ACTION STEPS</i></b>   | <b><i>MEASURABLE STATEMENTS (EXPECTED OUTCOMES)</i></b> | <b><i>ACHIEVED OUTCOMES</i></b> |
| •                            | •   | •                               |

**WORK TO BE COMPLETED:**

| <i><b>ACTION STEPS</b></i> | <i><b>MEASURABLE STATEMENTS (EXPECTED OUTCOMES)</b></i> | <i><b>ACHIEVED OUTCOMES</b></i> |
|----------------------------|---|---------------------------------|
| •                          | •   | •                               |

**WORK TO BE COMPLETED :**

| <i><b>ACTION STEPS</b></i> | <i><b>MEASURABLE STATEMENTS (EXPECTED OUTCOMES)</b></i> | <i><b>ACHIEVED OUTCOMES</b></i> |
|----------------------------|---|---------------------------------|
| •                          | •   | •                               |

**WORK TO BE COMPLETED:**

| <i><b>ACTION STEPS</b></i> | <i><b>MEASURABLE STATEMENTS (EXPECTED OUTCOMES)</b></i> | <i><b>ACHIEVED OUTCOMES</b></i> |
|----------------------------|---|---------------------------------|
| •                          | •   | •                               |

**NARRATIVE REPORT:**

**APPROVAL OF THE EVALUATION TABLE AND NARRATIVE REPORT**

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**Deputy Minister / Chief Executive Officer**

**Date**