**The Project Performance**

**Monitoring and Evaluation Form**

**administration of strategic planning**

**First- General Description of the Project:**

|  |  |
| --- | --- |
|  | **Project Name** |
|  | **The Project Implementing Sector** |
|  | **Project Manager** |
|  | **Brief Definition of Project**(Including relevant strategic objective and operating initiatives) |
| 1-2-3-4- | **Project Objectives** |
| 1-2-3-4- | **Project Outcomes** |

**Second- Implementation Follow-Up:**

**Phase (One, Tow, Three, Four, Five): ………………………………………….**

**Phase Implementation Duration: …………………………………………….**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Actual Budget** | **KPIs** | **Implementation Officer** | **Expected Outcomes** | **Executive Procedures** | **Implementation Duration** | **Activities** | **NO.** |
|  |  |  | 1........................................2........................................3........................................ | 1....................................2.......................................3..................................... |  |  |  |
|  |  |  | 1........................................2........................................3........................................ | 1........................................2........................................3........................................ |  |  |  |
|  |  |  | 1........................................2........................................3........................................ | 1........................................2........................................3........................................ |  |  |  |
|  | Total Actual Budget for Phase ( ) |  |  |

**Notes:**

**1.....................................................................................................................................................................................**

 **2.....................................................................................................................................................................................**

**Third- The Results of Technical Review:**

|  |  |
| --- | --- |
| **Notes** | **Technical Review Items** |
|  |  Compatible Not compatible | The project is compatible with the project's previously approved plan |
|  |  Achieved Non-achieved | Achieve KPIs |
|  |  Achieved Non-achieved | Achieve outcomes |
|  |  Achieved Non-achieved | Committing to the project's estimated budget |
|  |  Approval Disapproval  | Technical opinion |

* **Name of Supervisor of Administration of Strategic Planning:……………………………………**
* **Signature:………………………………………………………………………………………...**
* **Date:……………………………………………………………………………………………...**