

**THE COUNTY GOVERNMENT OF KISUMU**

INDIVIDUAL WORK PLAN (FROM JULY..... JUNE .....

NAME OF OFFICER.....DESIGNATION.....

PERFORMANCE OBJECTIVES		TASK DESCRIPTION	RESOURCES REQUIRED	EXPECTED RESULTS	TIME FRAME (BY WHEN)	PERFORMANCE INDICATORS
DEPARTMENT	INDIVIDUAL					

APPRASSEE'S NAME.....DESIGNATION.....SIGNATURE.....

SUPERVISORS NAME.....DESIGNATION.....SIGNATURE.....