**Online Consultation Project Planner**

Use this form to provide a guideline for your online community consultation project.

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| **Project Name** *(e.g. Marrickville Bike Strategy)* |  |
| **Site domain Name:** *(eg.Letstalkcityname)* | **Project subdomain:** *(eg. Letstalkcityname/projectname)* |
| **Project Launch Date:** | **Project Close Date:** |
| **Name** **of Project Contact**: | **Designation**: (e.g. Project Team Leader) |
| **Phone:** | **Email:** |
| **Outline your high level consultation strategy and outcome expectation:**  |

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| **Please select the “Feedback Tools” you wish to use in this project Y = Yes, N =No** |
| **Do you require Forums?**  |  | **Do you require a Survey?**  |  |
| **Do you require Story Telling Tool?** |  | **Do you require a Q & A Tool?** |  |
| **Do you require a Places Tool?** |  | **Do you require the Ideas Tool** |  |
| **Do you require Quick Polls?**  |  | **Do you require a Guest Book?**  |  |
| **Do you require a Formal Submission?**  |  | **Do you require the News feed?** |  |
| **Do you require a Q&A tool?** |  | Submission Email Address: (If yes please provide the email address) |  |
| **Please select the ”Resources” you wish to use in this project Y = Yes, N =No** |
| **Video Gallery**  |  | **Photo Gallery**  |  |
| **Frequently Asked Questions**  |  | **Library** |  |
| **Key Dates**  |  | **Who’s Listening widget** |  |
| **External Links**  |  | **Project Timeline** |  |
| **Custom Widget** |  | **Custom Widget** |  |

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| **Please provide your “Consultation Introduction” text in the space below.** |
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| **Please provide your Discussion Forum “Discussion Topics” and additional text in the spaces below.** |
| Discussion Topic 1. | Summary Text |
| Discussion Topic 2. | Summary Text |
| Discussion Topic 3. | Summary Text |
| Discussion Topic 4. | Summary Text |
| Discussion Topic 5. | Summary Text |
| Discussion Topic 6. | Summary Text |

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| **Please provide your Survey “Introduction, Questions and Responses” in the spaces below. (M = Mandatory Question O = Optional Question)** |
| Survey introduction test. | Please type the survey introduction text here: |
| Do you want unregistered participants to be able to complete the Survey? | Yes / No |
| *Question Type* | *M or O* | *Add your Survey Questions below.* | *Add your Response Options below (use a new line or bullet point for each)* |
| Q1. |  |  |  |
| Q2. |  |  |  |
| Q3. |  |  |  |
| Q4. |  |  |  |
| Q5. |  |  |  |
| Q6. |  |  |  |
| Q7. |  |  |  |
| Q8. |  |  |  |
| Q9. |  |  |  |
| Q10 |  |  |  |
| Q11 |  |  |  |
| Q12 |  |  |  |
| Q13 |  |  |  |
| Q14 |  |  |  |
| Q15 |  |  |  |
| Q16 |  |  |  |
| Q17 |  |  |  |
| Q18 |  |  |  |
| Q19 |  |  |  |

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| **Please provide the content for the Question and Answer tool in the spaces below.**  |
| Introduction. | Please type the introduction text here: |
| Acknowledgement message after a question is submitted. Include a timeframe in the above message for when responses can be expected: |  |
| Do you want the Questions to be sent to an e-mail address | Yes/No e-mail address: |

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| **Please provide the content for the Story Telling tool in the spaces below.**  |
| Introduction. | Please type the introduction text here: |
| Acknowledgement message after a question is submitted. Include a timeframe in the above message for when responses can be expected: |  |
| Do you want the submissions to be sent to an e-mail address | Yes/No e-mail address: |
| **Please provide the Mapper Co-ordinates and name of city.** |
| Introduction. | Please type the mapper introduction text here: |
| Do you want unregistered participants to be able to add a comment in the comment box | Yes / No |
| Comment box fields:1 | 2 |
| 3 | 4 |
| Thank you message: |  |
| Do you want project admin to receive e-mail responses | Yes/No e-mail address: |

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| **Indicate the “Submission Fields” you wish to use for your Submission Y = Yes, N =No** |
| **Name** |  | **Email Address** |  |
| **Street Address** |  | **Suburb** |  |
| **Type in your Submission** |  | **Attach your Submission**  |  |
| **Please provide your Quick Poll “Question and Response Options” in the spaces below.**  |
| *Quick Poll Question*  | *Response Options (New line for each)* |
| QPQ 1. |  |
| QPQ 2. |  |
| QPQ 3. |  |
| QPQ 4. |  |

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| **Please provide your FAQ “Questions and Answers” in the spaces below.**  |
| FAQ 1. | Answer |
| FAQ 2. | Answer |
| FAQ 3. | Answer |
| FAQ 4. | Answer |
| FAQ 5. | Answer |
| FAQ 6. | Answer |

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| **Please provide the names and location of “Documents to be loaded to the Library” in the spaces below.**  |
| Doc 1. | Location |
| Doc 2. | Location |
| Doc 3. | Location |
| Doc 4. | Location |
| Doc 5. | Location |
| Doc 6. | Location |

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| **Please provide the names and location of “Images to be added to the Photo Gallery” in the spaces below.**  |
| Image 1. | Location |
| Image 2. | Location |
| Image 3. | Location |
| Image 4. | Location |
| Image 5. | Location |
| Image 6. | Location |

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| **Please provide the names, description and URL location of “Videos to be added to the Video Gallery”.** |
| Video 1. | URL | Desc:  |
| Video 2. | URL | Desc: |
| Video 3. | URL | Desc: |
| Video 4. | URL | Desc: |

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| **Please provide the “Key Dates” for the project in the spaces below.**  |
| Date 1. | Activity, time and venue |
| Date 2. | Activity, time and venue |
| Date 3. | Activity, time and venue |
| Date 4. | Activity, time and venue |
| Date 5. | Activity, time and venue |
| Date 6. | Activity, time and venue |
| Date 7. | Activity, time and venue |
| Date 8. | Activity, time and venue |
| Date 9. | Activity, time and venue |

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| **Please provide the “Who’s Listening Team content for team members” for the project in the spaces below.**  |
| *Add the Project Screen Names below (e.g. Transport Planner)* | *Add the Project Team Roles below (e.g. Bike Strategy Coordinator)* |
| Project Team Screen Name 1. | Project Team Role 1. |
| Project Team Screen Name 2. | Project Team Role 2. |
| Project Team Screen Name 3. | Project Team Role 3. |
| Project Team Member 1 (optional) contact information | *(e-mail, phone, address)* |
| Project Team Member 2 (optional) contact information | *(e-mail, phone, address)* |
| Project Team Member 3 (optional) contact information | *(e-mail, phone, address)* |
| Team Bios: Yes/No | Provide text: |

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| **Please provide the “Embed Code” for twitter and Facebook links and streams, YouTube videos, google maps or slide shows you would like embedded in the Advanced Widgets in the spaces below.**  |
| Advanced Widget 1 | Embed Code |
| Advanced Widget 2 | Embed Code |

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| **Please provide the name and URL for “External Links” or links to other websites you wish to include in the project.**  |
| Link 1 Name | Link URL |
| Link 2 Name | Link URL |
| Link 3 Name | Link URL |

IMPORTANT:

1. Send this document to Anthea by reply e-mail.
2. Remember to click on the link provided in the e-mail to set your strategy session and training date for your engagement team.
3. Keep working on your site content.