



# Idea Form

Hamilton County Job and Family Services



**Employee:**

- Please complete sections 1, 2, and 3 of this form.
- Make two copies of the completed form.
- Submit the original form to your supervisor.
- Give one copy to your Section Chief.
- Keep one copy.

**Supervisor:** Please complete this process within one month of receiving the idea form.

- Review the idea and complete section #4.
- Discuss the idea with the Section Chief and agree on actions to take.
- During discussion, ask Section Chief to complete section #5 on your form — it's the original.
- Complete section #6.
- Meet with the employee to discuss.
- With the employee, complete section #7.
- Make a copy of the completed form and give the copy to the employee. Keep the original.

*Section 1: To be completed by employee.*

**Date Submitted:** \_\_\_\_\_

**Employee Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_

**Section Chief Name:** \_\_\_\_\_

*Section 2: To be completed by employee.*

**Please describe your idea. Clearly state the action to take and what the benefits would result if the idea is implemented.**

*"All innovations started out as simple ideas." ~Elaine Dundon*

# Idea Form - HCJFS

Section 3: To be completed by the employee.

Date Submitted: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Section Chief Name: \_\_\_\_\_

Section 4: To be completed by the supervisor.

## Supervisor Comments

*Be specific about why the idea will or will not work or changes needed.*

Section 5: To be completed by the Section Chief.

## Section Chief Comments

*Be specific about why the idea will or will not work or changes needed.*

Section 6: To be completed by the supervisor, after discussion with the Section Chief.

## Actions We'll Take Regarding This Idea:

*Describe what your department will do to implement the idea. If not being implemented, explain why.*

**Optional:** Employee should submit idea to \_\_\_ Fresh Ideas or \_\_\_ Project Gain

Section 7: To be completed by the supervisor and employee, after discussion about actions taken.

Date Feedback Provided to Employee: \_\_\_\_\_

Signature of Manager Providing Feedback: \_\_\_\_\_

Signature of Employee, when Receiving Feedback: \_\_\_\_\_

Employee Comments: