**Timeframe:** April 1, 2021 – March 31, 2023

| Key Project Activities | November 2019 | December 2019 | January 2020 | February 2020 | March 2020 | April 2020 | May 2020 | June 2020 | July 2020  | August 2020 | September 2020 |  October 2020 | Responsible Project Staff |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |

***Instructions:***

1. *You may add additional rows to the table (if needed).*
2. *The timeline* ***should NOT*** *exceed* ***2-pages****.*
3. *Place an “X” in the Timeline Chart boxes above to indicate the month(s) you will conduct each key project activity.*
4. *List the Responsible Project Staff in the far right-hand column as indicated. Here you may indicate the title of the staff, for example: Project Coordinator, Project Director, etc. You do not need to list individuals by name.*
5. *If you have questions about activities, please contact IHS Zero Suicide Initiative Program Official, Monique Richards at-240-252-9625 or* *monique.richards@ihs.gov*
6. ***DELETE ALL*** *instructions in* ***italics*** *when you complete the timeline.*