



# Weekly SIT Plan

Associate Name: \_\_\_\_\_

Duration: \_\_\_\_\_ to \_\_\_\_\_

A) Activity Review *Refer to ACT System for details report*

Activity Performance							
Tel	App	Pst	Cls	Training	Service	Join call	Referral
Activity Analysis		App / Tel		Pst / App		Cls / Pst	

Seek & Comment on activity review (refer to the previous Activity Goal Setting)

B) Sales Review *Refer to ACT System or Sales Report for details*

Sale Performance							
Life Sales		UT		PRS / EPF		Loan / SME	
Cases	ANP	Cases	RM	Cases	RM	Cases	RM

Seek & Comment on achievement review (refer to the previous Sales Target & Goal Setting)

C) Identify the Potential & Resources if any and give proper advice

D) Action Plan - Assign task if any & assist to plan for the next week activity

Leader Name : \_\_\_\_\_

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