Brainstorming Solutions Tracking Form

BASIC INFORMATION

Analysis Date: _____

Analyst: _____

Location: _____

Job Description: _____

Brainstormed Solutions	Business Impact			Ease of Implementation			Short-term (S) or Long-term (L) Solution?	Priority Score
	Low (1)	Moderate (2)	High (4)	Low (1) (Hard)	Moderate (2)	High (4) (Easy)		

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