

Employee Skill Development Plan

Employee Information

Employee Name

Position/Title

Department

Manager/Supervisor

Date

Current Skills Assessment

List current skills, strengths, certifications, and relevant experience

Development Goals

Describe the skills/knowledge to develop

Action Plan

Skill/Competency	Development Activity	Resources/Support Needed	Target Completion Date	Success Criteria
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Follow-Up & Review

Notes on progress, feedback, and areas for improvement

Employee Signature

Manager/Supervisor Signature