Professional Development Plan

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| --- | --- |
| Name: |  |
| Date: |  |
| Leader’s Name: |  |

**Professional Development – The Bottom Line**

Every employee is expected to improve his/her performance and capability year after year; development is the improvement in the capability of the employee to perform in his/her current job and his/her potential to perform future roles.

Development is about learning new skills and knowledge and the ability to apply it effectively in the workplace.

What’s in it for you?

* Better able to successfully achieve your goals
* Gratification from striving to be your best
* Opportunity to expand skills and experience for future career growth

Note: This document is merely a template to help you in your personal and career growth – to help you move from “good” to “great”! Feel free to use all or part of the elements provided. Research shows that the more planning and details you build into a development plan, the more likely you will actually stick to the plan and change for the better!

**Steps in the development planning process**

Technical & Functional Knowledge and Skills

Competencies and Behaviors

Consider

**Determining where to focus your development efforts**

***Where will development provide you with the greatest impact for your success?***

* Review the Competencies
* Consider the technical and functional knowledge and skills required for your success
* Review the Development Planning Tip Sheet
* Recall prior feedback (previous performance reviews, 360 degree feedback, Birkman feedback, etc.)
* Determine where focused development would have the greatest impact on your ability to achieve your objectives successfully
* In addition to your annual goals/objectives, consider your career/growth goals in determining which competencies would be most impactful if developed.
* Select from one to three areas that will be most beneficial for your development (e.g., leveraging a strength, strengthening a proficiency, or neutralizing a weakness) and list them in the table below. Indicate with a check mark whether this is a strength, proficiency, or weakness.

***I will see the greatest impact on my success by focusing development in the following areas:***

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| --- | --- | --- | --- |
| ***Competency/Behavior*** | ***Strength***  ***to Leverage*** | ***Proficiency***  ***to Strengthen*** | ***Weakness***  ***to Neutralize*** |
| ***1.*** |  |  |  |
| ***2.*** |  |  |  |
| ***3.*** |  |  |  |

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| **Development Action Plan – Goal 1** | | | | | |
| **Participant  Name:** |  | **Leader Name:** |  | **Competency/Behavior  Of Focus:** |  |

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| **Development Goal 1**  *What do you want to change? What will result from this change? What would success look like?* | **I will improve\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ so that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**  **I will know that I have been successful when \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.** |

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| **Tasks/Activities**  *What specific tasks/activities will you do to help reach your goal?* | **Target Dates** *When will you start/stop and complete each action?* | **Support Needed/Barriers  To Overcome** *What help will you need and from whom? What barriers will you likely face?* |
| **1.** |  |  |
| **2.** |  |  |
| **3.** |  |  |
| **4.** |  |  |
| **5.** |  |  |

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| **Quarterly Update** | **Progress toward Goal** | **Your Initials**  **& Date** | **Leader’s**  **Initials & Date** |
| **Update 1** |  |  |  |
| **Update 2** |  |  |  |
| **Update 3** |  |  |  |
| **Update 4** |  |  |  |

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| **Development Action Plan – Goal 2** | | | | | |
| **Participant  Name:** |  | **Leader Name:** |  | **Competency/Behavior  Of Focus:** |  |

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| **Development Goal 2**  *What do you want to change? What will result from this change? What would success look like?* | **I will improve\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ so that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**  **I will know that I have been successful when \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.** |

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| **Tasks/Activities**  *What specific tasks/activities will you do to help reach your goal?* | **Target Dates** *When will you start/stop and complete each action?* | **Support Needed/Barriers  To Overcome** *What help will you need and from whom? What barriers will you likely face?* |
| **1.** |  |  |
| **2.** |  |  |
| **3.** |  |  |
| **4.** |  |  |
| **5.** |  |  |

**Review your progress with your leader/mentor every 90 days.**

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| **Quarterly Update** | **Progress toward Goal** | **Your Initials**  **& Date** | **Leader’s**  **Initials & Date** |
| **Update 1** |  |  |  |
| **Update 2** |  |  |  |
| **Update 3** |  |  |  |
| **Update 4** |  |  |  |

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| **Development Action Plan – Goal 3** | | | | | |
| **Participant  Name:** |  | **Leader Name:** |  | **Competency/Behavior  Of Focus:** |  |

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| **Development Goal 3**  *What do you want to change? What will result from this change? What would success look like?* | **I will improve\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ so that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**  **I will know that I have been successful when \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.** |

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| **Update 3** |  |  |  |
| **Update 4** |  |  |  |

**Professional Goals**

**Short-Term Goals (1 – 3 years):**

**Midrange Goals (5 - 6 years):**

**Long-Term Goals (10 years):**