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| **Personal Development Plan** |
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| Employee Name: |       | Approved by: |       |
| Position: |       | Position: |       |
| Department: |       | Department: |       |

| **Development Needs** | **How to be Achieved** | **Realistic Target Date** | **Desired outcome or effect on performance and how to be reviewed** |
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| **Actual outcome of development activity:**      |
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| **Actual outcome of development activity:**      |
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| **Actual outcome of development activity:**      |
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| **Actual outcome of development activity:**      |

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| Employee Name:Signature:Date: |        | Approved by:Signature:Date: |        |