Development Plan - Professional Development – The Bottom Line

Every employee is expected to improve their performance and capability year after year; development is the improvement in the capability of the employee to perform in their current job and their potential to perform future roles.
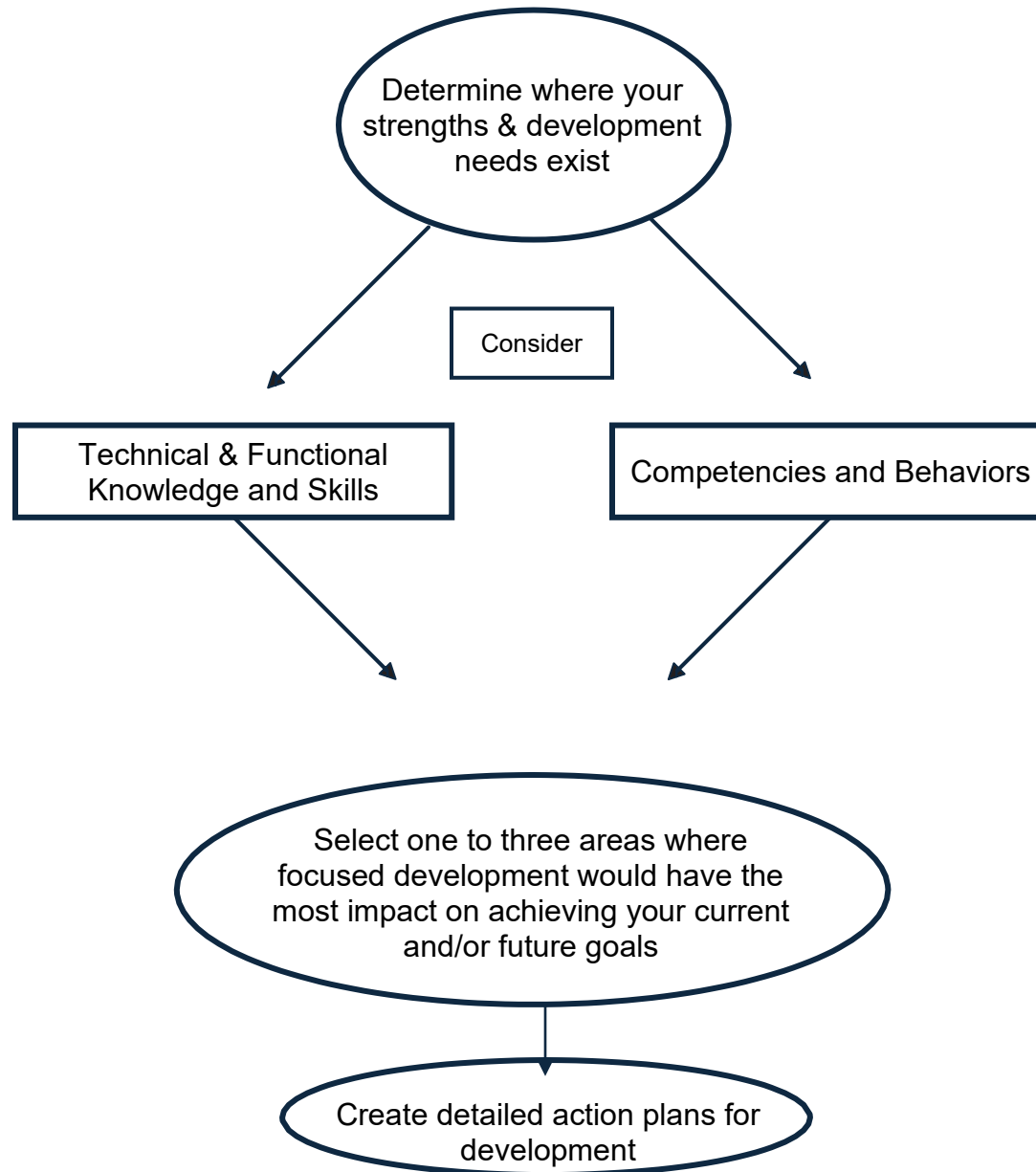
Development is about learning new skills and knowledge and the ability to apply it effectively in the workplace.

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

This document is a template for use. Research shows that the more planning and details you build into a development plan, the more likely you will stick to the plan and change for the better!

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Steps in the development planning process

Determine where your strengths & development needs exist

Consider

Technical & Functional Knowledge and Skills

Competencies and Behaviors

Select one to three areas where focused development would have the most impact on achieving your current and/or future goals

Create detailed action plans for development

Determining where to focus your 12-month development efforts

Where will development provide you with the greatest impact for your success?
- Consider the technical and functional knowledge and skills required for your success
- Recall prior feedback (previous performance reviews, 360-degree feedback, peer feedback, etc.) and start with the courses that will address those areas
- 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 it is a strength, proficiency, or weakness.
- Review the below with your manager and sign-off that these will be the focus areas for the next 12 months.
- Development activities should include a combination of: 1) 35% coaching, 2) 55% experiential (on-the-job) learning, and 3) 10% course attendance with an action plan to put skills into practice.

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

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

Employee Signature: _____   Date: _____

Supervisor Signature: _____   Date: _____

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Development Action Plan – Goal 1		
Employee Name:	*Leader Name:*	*Competency/Behavior of Focus:*

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_____**.**

Tasks/Activities/Course *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.

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		
Employee **Name:**	**Leader** **Name:**	**Competency/Behavior** **of Focus:**

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_____.

Tasks/Activities/Course *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.

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		
Employee Name:	**Leader Name:**	**Competency/Behavior of Focus:**

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_____.

Tasks/Activities/Course *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.

Quarterly Update	Progress toward goal	Your Initials & Date	Leader's Initials & Date
Update 1			
Update 2			
Update 3			
Update 4			

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Professional Goals

Short-Term Goals (1 – 3 years):

_____

_____

_____

Midrange Goals (5 - 6 years):

_____

_____

_____

Long-Term Goals (10 years):

_____

_____

_____

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