



Personal Development Plan

Skills Performance Gap	Outcomes Expected	Suggested training and /or development activity	Suggested mode of delivery	Suggested Time Frames	Work opportunity created to practice skill/development area	Support Person
1.						
2.						
3.						

Signed and accepted by the Employee

W. J. K.

Date: 30/6/2020

Signed by the City Manager on behalf of the Municipality

Neil Bratt

Date: 30/06/2020

[Handwritten initials]