




## **Personal Development Plan**

**EXECUTIVE DIRECTOR: PUBLIC SAFETY**

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

  
\_\_\_\_\_

Date: 27/11/23.

Signed by the City Manager on behalf of the Municipality

\_\_\_\_\_  
Date: \_\_\_\_\_