

NAME:

DATE:

JOB TITLE:

MEMBERSHIP NUMBER:

MEMBERSHIP GRADE:

STATEMENT OF INTENT: LONG-TERM GOALS

What would you like to be doing, professionally, in 3 years?

What would you like to be doing, professionally, in 5 years?

What would you like to be doing, professionally, in 10 years?

Three strengths – what are you best at?

Three weaknesses – what would you like to be better at?

What three areas would you like to develop further?

PERSONAL DEVELOPMENT PLAN

Considering your long-term goals, set three objectives and make an action plan

Objective	Success criteria	Date	Action plan	Review date
<i>What do you want/ need to learn? What do you want to do better?</i>	<i>How will you know when you have achieved your objective? How can you measure your progress?</i>	<i>When will you achieve this objective?</i>	<i>What learning method will you use and what resources are required to achieve the goal?</i>	<i>List the steps you will take to achieve this goal Set a date to review your plan from the progress you have made?</i>

This document should be saved for future reference.

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