

**Personal Development Plan
for Team Leaders**

Name: _____

Leadership Role: _____

Teams/Area: _____

Period Covered: _____ to _____

<u>Long Term Professional Development Goals</u>

Annual Outcomes	Steps to Achieving Outcome	Resources

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How will outcomes be measured?

How will change in performance be measured?

When will plan be re-evaluated?

Team Leader:

(Signature) (Date)

Coach:

(Signature) (Date)