**People Development**

**Learning and Development Form *Type of training***: *Requirement of role* □ *Identified from PDR or Job Chat* □ *Self development* □

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| --- | --- | --- | --- | --- | --- |
| Name: | | | Job Role: | | |
| *Section 1 – Pre activity*  Description of learning or  development activity: |  | | | Activity dates:  Start  Completion | |
| How will this activity help you in your job role?  What do you expect the impact to be on your team and customers? |  | | | | |
| Line Manager’s expectations of this activity  *(to be completed after learners comments)* |  | | | | |
| Staff signature: | | Manager signature: | | | Date: |

|  |  |  |  |
| --- | --- | --- | --- |
| *Section 2 – Post activity*  How has this activity helped you, your team, your department & customer?  What have you implemented or changed since undertaking this activity? |  | | |
| Staff signature: | | Manager signature: | Date: |

*Section 1 – Pre activity to be completed at least 1 week before activity. Section 2 – Post activity to be completed between 3-4 weeks, or as appropriate, following the activity.*