

Needs form 2

Personal interview

Name of employee:		<p>N.B. The personal further training plan should be viewed together with the needs of the entire department. This applies in particular to the minimum number of participants in courses.</p>
Salary group:		
Workplace:		

Regular activities carried out by the employee	Qualification status* (assessed by)		Further training needs**	
	Employee	Supervisor	Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

* Please conduct the assessment on a scale of 1 (very good) to 5 (semi-skilled knowledge)
 ** If "Yes" to include in the further training plan

Development expectations *of the employee* (technical, social, EDP, management):

Development expectations *for the employee by the management* (technical, social, EDP, management):