Career Plan

Name:				
Current Position:				
Employer:				
Date:				
Part 1: Knowing				
The first step in planning your career is evaluating and understanding your aspirations;				
_	; drivers and other influences. Please indicate which aspects of the			
	ou have evaluated:			
■ My Key Strengt	ths			
My Technical S	Skills			
■ My Work Value	es			
☐ My key fields or	f interest			
Briefly record these	e here if you wish (optional)			
For an objective as	sessment, seek guidance from others as well. A discussion regarding			
your career aspirat	ions, strengths and development needs during a performance review			
is regarded as a mi	inimum. Informal discussions throughout the year with various people			
are encouraged.				
Who have you disc	cussed your career with?			
■ Manager				
☐ Professional Le	eader			
☐ Professional/cli	inical Supervisor			
☐ Educator				
☐ Tutor (at tertian	y institution)			
☐ Mentor	•			
	oment professional			
☐ Other (please s				
are encouraged. Who have you disc. Manager Professional Le. Professional/cli Educator Tutor (at tertiary Mentor Career Develop	eader inical Supervisor y institution) oment professional			

knowledge you wish to develop. What are these?
Development Opportunities:
Part 2: Explore Possibilities
Research the development possibilities and career pathways that are open and attractive
to you. Consider your self assessment outcomes and future health workforce needs.
Pathway Option 1:
Prerequisites and requirements to achieve this option:

Pathway Option 2:
Prerequisites and requirements to achieve this option:
Pathway Option 3:

Through your self assessment you may have identified particular skills or areas of

Prerequisites and requirements to achieve this option:

Part 3: Making Choices
<u> </u>
Consider the suitability of each option and decide (with the assistance of the person
report to) which one is the best match to your aspirations and workforce needs. Beformaking the decision, consider also:
What are the perceived barriers/obstacles and how can they be overcome
Outside of work commitments
The level of involvement required
Which of my options responds best to my employer and workforce needs?
Based on the choices you have made, and the development opportunities you have
identified now write your goal(s). Aim to make each goal as specific as you can.
Goal 1
Dequired to achieve goal 1:
Required to achieve goal 1:

Goal 2	
Required to achieve goal 2:	
Goal 3	
Required to achieve goal 3:	

Part 4: Make it Happen

In order to achieve your goals you need to have an agreed course of action. You and your manager need to have a clear understanding of what steps you will be taking, the commitment needed by both you and your manager and relevant timeframes.

You are now ready to detail who has to do what to make things happen.

Agreed course of action/action plan

start date	completion date	Skill,	How will this be gained?	Provider (e.g. workplace

	experience,	(e.g. on the job experience,	educator, university,
	knowledge to be	formal/informal	coach/mentor etc
	gained	seminars/courses,	
		coaching/mentoring etc)	
Assessing the eff	ectiveness of the a	action plan	
_		nich the agreed course of action h	has achieved the
stated goals	coo the extent to wi	non the agreed obtaine or donor.	ido domeved ine
stated goals			
Portability			
_	olonge to the employ	voo/trainaa It provides the basis	for ongoing
•		yee/trainee. It provides the basis	
		future employment and profession	· ·
-	rmation to future en	nployers or others requires the er	nployee/trainee's
consent.			
Review Dates			
Progress on the ag	reed course of action	on will be reviewed on	
This career plan wi	ill be reviewed on		
Manager/Supervis	sor sign-off		
N			
Name:			
Title:			
Date:			
Employee/trainee	sign-off		

Name:

Title:

Date: