Competency Requirements and Record Form

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| **COMPETENCY REQUIREMENTS and RECORD FORM** | | |
| **Position Title:** | **Employee Name:** | |
| **Competency Requirements** | **Record of Competency** | |
| **Verification Method** | **Verification Performed By (Name, Title, Date)** |
| **Education:** | | |
|  |  |  |
| **Certifications or Licenses:** | | |
|  |  |  |
| **Experience:** | | |
|  |  |  |
| **Skills:** |  |  |
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|  |  |  |
|  |  |  |
| **Other:** | | |
|  |  |  |
|  |  |  |
|  |  |  |
| **Training:** | | |
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|  |  |  |
|  |  |  |
|  |  |  |
| Does this employee have any gaps in required competencies?  YES  NO  **If there are competency gaps, document the additional training or other actions needed on page 2.** | | |

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| **COMPETENCY REQUIREMENTS and RECORD FORM (Page 2)** | | | | | | |
| **TRAINING PLAN** | | | | | | |
| **Position:** | | | | **Employee:** | | |
| List Specific Training or  Other Actions Needed: | | Target Completion Date | Training Class/Method | | Completion Date | Verification Performed by  (Name, Title, Date) |
| 1 |  |  |  | |  |  |
| 2 |  |  |  | |  |  |
| 3 |  |  |  | |  |  |
| 4 |  |  |  | |  |  |
| 5 |  |  |  | |  |  |
| 6 |  |  |  | |  |  |
| 7 |  |  |  | |  |  |
| 8 |  |  |  | |  |  |
| 9 |  |  |  | |  |  |
| 10 |  |  |  | |  |  |
| 11 |  |  |  | |  |  |
| Approval of Plan:  Employee: : Date:  Evaluator: Date: | | | | |  | |