**Annexure 7 – Templates on Training, Learning and Development (HR 009A – HR 009E)**

###

**HR 009A – Template on Capturing Individual Information on Training Needs**

# Name of the Division:

|  |  |
| --- | --- |
| Name of staff member: |  |
| Section/Unit: |  |
| General:- |
| 1. | Are you a new employee or a long-standing employee of the company? |  |
| 2. | How long have you been in your present job? |  |
| Confirmation of Current Duties:- |
| 3. | Indicate the key duties and responsibilities in your job role  |
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|  |  |
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| Job Analysis:- |
| 4. | Describe the tasks you regularly perform that are critical to carrying out your job effectively. |
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|  |  |
| 5. | Describe the type of equipment you are required to use (for example, Machinery, Equipment, Computers, Printers, Data Systems etc.). |
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|  |  |
|  |  |
|  |  |
| 6. | What are the technical competencies required in your job? |  |
|  |  |
| 7. | To what extent does your job require you to work closely with other people, such as customers, clients or people in your own organization? Please circle. |
|  | Very little Moderately A lot |
| 8. | How much autonomy is there in your job, ie, to what extent do you decide how to proceed with your work? Please circle. |
|  | Very little Moderately A lot |
|  |  |
| Training Needs:- |
| 9. | To perform your current job: What training do you still need (either on-the-job or a formal course) to perform your current job competently (e. g. IT literacy, English as a second language, etc.)? |
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|  |  |
|  |  |
|  |  |
| 10. | To perform other jobs in the organization: What other roles in the organization would you be interested in doing if a vacancy became available (eg, transfer to another section, higher position, etc.)? |
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|  |  |
| Future Development Needs:- |
| 11. | What are your career aspirations? |
|  |  |
|  |  |
|  |  |
|  |  |
| 12. | What training or development do you need to help make this happen (e. g. external degree study, formal meeting procedures, leadership training, etc.)? |
|  |  |
|  |  |
|  |  |
|  |  |
| Recognition of Prior Learning:- |
| 13. | What training have you attended within the last three years? (This will help identify if any training sessions have been missed or if any refresher training is required.) |
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|  |  |
|  |  |
|  |  |
| 14. | What training or skills have you acquired outside your current job that may be relevant to the wider organization? |
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|  |  |
| 15. What are the most preferred methods of training that you desire?…………………………………………………………………………………………….....................………………………………………………………………………………………………………….Action Plan:- |
|  | Agreed training and development to be provided over the next 12 months: |
|  | Training |  |
|  | 1. |  |
|  | 2. |  |
|  | 3. |  |
|  | 4. |  |
| Signature of Staff Member | : |  | Date : |  |
| Signature of Supervisor | : |  | Date : |  |

**HR 009B – Template on Capturing Divisional Training Needs**

Division: …………

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Technical Competencies  | Staff 1 | Staff 2 | Staff 3 | Staff 4 | Staff 5 | Staff 6 | Staff 7 |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Non-Technical Competencies  | Staff 1 | Staff 2 | Staff 3 | Staff 4 | Staff 5 | Staff 6 | Staff 7 |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Note:** Tick the staff that requires the specific technical and non-technical competencies from the list identified

**HR 009C – Template on Annual Training Plan**

Annual Training Plan (Training Calendar) for the period from April to March, 2021

Month of April 2021

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Program No | Program Title | Target Participants (job category) | Related Division  | Venue/ Training Institution  | Expected Participants # | Program Duration – Days # | Estimated Cost (Rs) | Cost per Head (Rs) |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
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Month of May 2021

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Program No | Program Title | Target Participants (job category) | Related Division  | Venue/ Training Institution  | Expected Participants # | Program Duration – Days # | Estimated Cost (Rs) | Cost per Head (Rs) |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
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Month of June 2021

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Program No | Program Title | Target Participants (job category) | Related Division  | Venue/ Training Institution  | Expected Participants # | Program Duration – Days # | Estimated Cost (Rs) | Cost per Head (Rs) |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
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…Month of March 2022

**HR 009D – Training Program Planning Template**

|  |  |
| --- | --- |
| To |  |
| From |  |

|  |  |
| --- | --- |
| Date |  |

|  |  |  |
| --- | --- | --- |
| 1. Program

Description  | Program Title  |  |
| Scheduled For |  | Days # |  |
| Venue  |  |
| 1. Objectives (What would be the training needs?)
 |  |
|  |
|  |
| 1. Target Group

(Who would be the participants?) |  |
|  |
|  |
|  Participants # |  | Female |  | Male |  |
| 1. Subject Contents (What specific subjects that would be covered?)
 |  |
|  |
|  |
|  |
|  |
| 1. Methodology (How training is delivered or techniques used?)
 |  |
|  |
|  |
|  |
| 1. Expected Outcome (What the results that could be achieved after the training?)
 |  |
|  |
|  |
|  |
| 1. Resource Persons

(Who would be the persons undertake training sessions? see the session plan). |  |
|  |
|  |
|  |

|  |  |  |
| --- | --- | --- |
| 8. Training Aids and Materials | Training Aids: |  |
|  |
| Training Materials: |  |
|  |
| 9. Logistic Arraignment | From | To | Place /Venue | Capacity |
| 1. Lecture or Seminar Hall
 |  |  |  |  |
| 1. Training Room
 |  |  |  |  |
| 1. Audio Visual Equipment
 |  |
| 10. Transport Arrangement  | Resource Persons | Company Staff  | Participants |
|  |  |  |  |
| 11. Cost Estimate  | Unit Cost (Rs) | Quantity & Day # | Cost (Rs) | Mode of Payment |
| Hall charges  |  |  |  |  |
| Additional cost for the halls  |  |  |  |  |
| Residential facilities  |  |  |  |  |
| Meals  | Breakfast  |  |  |  |  |
| Lunch |  |  |  |  |
| Dinner  |  |  |  |  |
| Tea  | Morning  |  |  |  |  |
| Evening  |  |  |  |  |
| Resource persons fees  |  |  |  |  |
| Participants’ attendance allowance |  |  |  |  |
| Transport cost  |  |  |  |  |
| Stationary cost  |  |  |  |  |
| Sundry cost  |  |  |  |  |
| Total Cost & Unit Cost per Head |  |  |  |  |
| Budget Code  |  | Cash Advance  | Rs.  |

Prepared by----------------------------------------------- Training Officer Checked and recommended by

(Coordinated through divisional staff) HR Manager ---------------------------------------

 (In consultation with relevant HOD)

Meeting /Not Meeting Divisional

Training Requirement by……………………………………………. (HOD)

Approved / Not Approved by……………………………………….. (ED)

Note:

1. Quotations to be submitted, if the meals, hall/residential facilities, transport or any other services are obtained from external parties
2. The Session Plan to be prepared followed by the relevant template reference.

**HR 009E – Template on Training Feedback Evaluation**

SAMPLE - TRAINING EVALUATION FORM

Instructions: Using the understanding that you now have at the end of today’s training, please rate the items below about the training you have received.

Date & Time :

Topic/s Covered:

Presented by :

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Description | Pre & Post | Low | Medium | High  | Does not Apply  |
| 1 | Ability to counsel clients/Staff about the topic/s covered in this training  | Before the Training  | 1 | 2 | 3 | 4 | 5 | 6 | 0 |
| After the Training  | 1 | 2 | 3 | 4 | 5 | 6 | 0 |
| 2 | Ability to manage clients/ staff regarding topic/s covered in the this training  | Before the Training  | 1 | 2 | 3 | 4 | 5 | 6 | 0 |
| After the Training  | 1 | 2 | 3 | 4 | 5 | 6 | 0 |
| 3 | Overall Knowledge of the topic/s covered in this training  | Before the Training  | 1 | 2 | 3 | 4 | 5 | 6 | 0 |
| After the Training  | 1 | 2 | 3 | 4 | 5 | 6 | 0 |
|  |  |  |  |  |  |  |  |  |  |
| 4 | Clarity of the Training Program  | Presentation and explanation  | 1 | 2 | 3 | 4 | 5 | 6 | 0 |
| 5 | Time Management  | From the start to the end  | 1 | 2 | 3 | 4 | 5 | 6 | 0 |
| 6 | Responsiveness  | Total back ground understanding & Management  | 1 | 2 | 3 | 4 | 5 | 6 | 0 |
| 7 | Overall facilities provided to make comfortable environment for the participants.  | During the Training  | 1 | 2 | 3 | 4 | 5 | 6 | 0 |
| 8 | Any other comments that you would like to communicate to the Trainer / Training Department /Sponsors / Supervisors  |  |