

Franchisee Skills Development Schedule

Date: [Insert Date]

Dear [Franchisee Name],

We are pleased to share your skills development schedule designed to enhance your business operations and maximize profitability over the upcoming months.

Skills Development Modules

Date	Module	Duration	Facilitator
[Insert Date]	Financial Management	3 hours	[Facilitator Name]
[Insert Date]	Customer Service Excellence	4 hours	[Facilitator Name]
[Insert Date]	Marketing Strategies	2 hours	[Facilitator Name]

Additional Resources

Please find attached additional reading materials and resources that can aid in your learning.

Should you have any questions, feel free to reach out.

Best regards,

[Your Name]

[Your Position]

[Company Name]

[Contact Information]