## **Training Needs Assessment**

Date: [Insert Date]

To: [Employee Name]

Department: [Department Name]

From: [Your Name]

Subject: Training Needs Assessment

Dear [Employee Name],

As part of our ongoing commitment to professional development and operational excellence, we are conducting a training needs assessment within our organization. This assessment aims to identify skills gaps and determine the areas where training can support your professional growth and enhance team performance.

We kindly ask you to complete the attached survey, which is designed to gather your insights on the following:

- Your current skills and competencies
- Areas where you feel you need additional training
- Your career development goals

Please return the completed survey by [Insert Deadline]. Your feedback is invaluable in helping us tailor our training programs to meet your needs.

Thank you for your cooperation and commitment to your professional development.

Sincerely,

[Your Name]
[Your Position]
[Your Contact Information]