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| Your Name, Title |  | Your Supervisor’s Name, Title |

| Title of Stretch Assignment | |  | |  | Period Covered |  | |
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| **Assignment Description** | | | **Target Competencies**  **to Develop** | | | | **Competency Strengths**  **to Leverage** | |
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| **Major Sub-Activity\*** | | | **Completion Date** | | | | **Feedback Method(s)** | |
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| **Resources**  **Needed** |  | | | | | | | |