

Individual Development Plan

Name:

Position:

Department:

Supervisor:

Date:

Goals	Skills or Competencies	Resources	Activities	Status
<i>To be achieved (from performance plan)</i>	<i>To be learned or acquired</i>	<i>What is needed (money, time, Etc.)</i>	<i>Possible learning opportunities to try</i>	<i>(Start/Completed Results)</i>
Short-range <i>Critical within present position (1 Year)</i>				
Mid-range <i>Important for growth within present position (2 Years)</i>				

<p>Long-range</p> <p><i>Helpful for achieving career goals (3-5 Years)</i></p>				
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