

Employee Development Plan

Individual Development Plan (IDP) for:

Instructions:

Name:

Title:

Supervisor:

Date Started:

Date to Evaluate Progress:

Continuous learning and development is a very important part of your job.

This form should be completed and returned to your supervisor prior to your appraisal discussion. Your supervisor will discuss your development goals and specific ways that he or she can help you achieve them when discussing your annual performance evaluation. This form will become part of your evaluation record.

Please sign and date in the space provided to indicate that you have reviewed and discussed this document.

Employee:

Date:

Supervisor:

Date:

Employee Development Planning Form

1. **My strongest areas** – (list those things in your job you feel you do best):

2. List those **areas of additional education/training or on-the-job experiences** which have assisted or could assist you in performing your duties (school courses, assignments, memberships, task force memberships, seminars, technical training, etc. that you are currently enrolled or have taken since last review):

3. **Areas I would like to develop** – (list areas you would like to learn more about, or that you would like to do better):

4. What specific **things can I do to** strengthen these areas?

5. How can my **supervisor help** me strengthen these areas? (List specific things your supervisor can do to help – (training they can provide, etc.)

Building on Strengths

In the spaces provided below, please list the strengths you have targeted or greater use, your specific objectives and action plans, the involvement of others you will require, and your target date for completion.

| Strengths Targeted for Greater Use STEP 1: Objective | Step 2 Action Plans | Step 3 Involvement of Others | Step 4 Target Date |
|---------------------------------------------------------|------------------------|---------------------------------|-----------------------|
| <i>Strength:</i> | | | |
| <i>Strength:</i> | | | |
| <i>Strength:</i> | | | |

Extent of “FIT” in Present Assignment

1. Circle the extent which necessary skills/experience fit and utilized in present assignment.

| | | | | | | | | | | | | | | | | | |
|-----------------|--------------------|-----|---|---|---|---|---|------|-------------------|--------------------|-----|---|---|---|---|---|------|
| Employee | Skills Fit | Low | 1 | 2 | 3 | 4 | 5 | High | Supervisor | Skills Fit | Low | 1 | 2 | 3 | 4 | 5 | High |
| | Skills Utilized | Low | 1 | 2 | 3 | 4 | 5 | High | | Skills Utilized | Low | 1 | 2 | 3 | 4 | 5 | High |

Employee Comments:

Supervisor Comments:

2. Circle the degree of challenge and level of employee satisfaction in present assignment.

| | | | | | | | | | | | | | | | | | |
|-----------------|--------------|-----|---|---|---|---|---|------|-------------------|--------------|-----|---|---|---|---|---|------|
| Employee | Challenge | Low | 1 | 2 | 3 | 4 | 5 | High | Supervisor | Challenge | Low | 1 | 2 | 3 | 4 | 5 | High |
| | Satisfaction | Low | 1 | 2 | 3 | 4 | 5 | High | | Satisfaction | Low | 1 | 2 | 3 | 4 | 5 | High |

Employee Comments:

Supervisor Comments:

Addressing Developmental Needs

In the spaces provided below, please record the development needs you have targeted for improvement, your specific objectives and action plans, the involvement of others you will require, and your target date for completion.

Needs Targeted for Greater Use

| STEP 1: Objective | Step 2 Action Plans | Step 3 Involvement of Others | Step 4 Target Date |
|------------------------------|--------------------------------|---------------------------------------------|-------------------------------|
| <i>Developmental Need:</i> | | | |
| <i>Developmental Need:</i> | | | |
| <i>Developmental Need:</i> | | | |