

**APPENDIX F
INDIVIDUAL DEVELOPMENT PLAN
PRIVACY ACT STATEMENT**

Section 4103 of Title 5 to U.S. Code authorizes collection of this information. This information will be used by staff management personnel and the Personnel Office servicing your locality, to plan and/or schedule training and development activities. Collection of your Social Security Number is authorized by Executive Order 9397. Furnishing the information on this form, including your Social Security Number, is voluntary.

NAME:	SSN:	PERIOD COVERED:	CAREER FIELD:
POSITION TITLE/GRADE:		ORGANIZATION:	

1. DEVELOPMENTAL OBJECTIVES (Skills/Performance Enhancement, Career Development, Etc.)

a. Short-Term Objectives	b. Long-Term Objectives (3-5 Years)
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.

2. MANDATORY TRAINING FOR LICENSURE

Course Title/Number	Objective Supported	Course Provider	Date Required	Hours	Tuition	Est Travel/ Per Diem
1.						
2.						
3.						
4.						
5.						
6.						

3. UNIVERSAL MANDATORY TRAINING (Priority I)

Course Title/Number	Priority	Course Provider	Date Required	Hours	Tuition	Est Travel/ Per Diem
1.						
2.						
3.						
4.						
5.						
6.						

