

UNITED STATES DEPARTMENT OF AGRICULTURE Grain Inspection, Packers and Stockyards Administration INDIVIDUAL DEVELOPMENT PLAN	Current Performance Elements Identified for Development/Training	Training Period : October 200_ - September 200_ Division, Branch/Field/Regional Office
--	--	---

Name of employee (Last, First, Middle Initial)	Present Job Title, Series, Grade:
--	-----------------------------------

The supervisor and employee completed the IDP process. No further development is desired/required at this time.

Performance Related Development Objectives <i>Knowledge, Skills, and Abilities</i>	Developmental Work Experiences (OJT, Details, Self Development, etc.)	Formal Training (Courses, seminars)	Dates	Cost

Describe short-term career interests. Where do you expect to be in two years?

Career development discussion? Yes No If yes, summarize.

This program or activity will be conducted on a nondiscriminatory basis

Employee's Signature	Date	Supervisor's Signature	Date
----------------------	------	------------------------	------