**INDIVIDUAL DEVELOPMENT PLAN**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | | |
| **Unit/Division:** | |  | | |
| **Date Accomplished:** | | |  | | |

Kindly fill out the table below according to the result of the individual competency assessment.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Competencies** | **Strength** | **Development**  **Needs** | **Action Plan**  **(Recommended Development Intervention)**  **Coaching, Mentoring, Training, and others** | **Timeline** | **Resources Needed** |
| CORE BEHAVIOURAL COMPETENCIES |  |  |  |  |  |
| LEADERSHIP SKILLS *(for Chiefs)*  CORE SKILLS *(for personnel)* |  |  |  |  |  |
| TECHNICAL COMPETENCIES |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Rater |  | Ratee |