

INDIVIDUAL DEVELOPMENT PLAN

A. EMPLOYEE'S PROFILE

Name (Last, First, MI)	Sex M/F	Age	Position and Salary Grade [Year(s) in the position]	Division/Office	Supervisor's Name	Period (3 years)
DIAZ, SIMEON R.	М	58	LMO III/18/5 YEARS & 5 MONTHS	TSD/Regulations & Permitting Section	CYNTHIA U. LOZANO	2023-2025

B. DEVELOPMENT PLAN

(Based on the competency assessment conducted and/or the results of the review of performance, please identify the top gaps or weaknesses among the competencies assessed that the employee needs to focus for development, improvement or enhancement. It would be best to prioritize FIVE (5) developmental areas over a three-year period.)

Development Targets	Developmental Activity	Success Indicators	Planned Completion Date	Means of Verifications	Completed Date	Remarks
PCO5- Preparation of NRM Related Plans	Workshop/Mentoring	Learned in the preparation of NRM related Plans	June, 2024	Certificate of Participation		
PCO6- ENR Accounting Workshop		Learned the procedures/ guidelines in the conduct of environmental accounting	September, 2024	Certificate of Participation		
PCO11-IEC, Social Marketing & Extension support	Workshop/Mentoring	Was able to learn the basics of Social Marketing & Extension Support	December, 2024	Certificate of Participation		
PCO 13- ENR Law Enforcement	Workshop	Enhanced knowledge regarding Law Enforcement	December, 2024	Certificate of Participation		
PCO16- Tenure and Rights Assessment	Workshop	Was able to gain knowledge and put into practice	December, 2024	Certificate of Participation		

I acknowledge and understand my individual development plan as discussed with my supervisor. I affirm that the development targets and the corresponding details indicated in my IDP will contribute in the delivery of service excellence in the Department. I, therefore, commit to accomplish the targets in the given period.

Employee Signature:	Secces (Date:	4/28/23	Supervisor Signature:		Date:	4/28/23	
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