



## 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)
SAET, LORELYN, P.	F	37	Accountant III/ SG19/ 12 years in the position	Management Services Division/ PENRO Marinduque	GEMMA P. DELOS REYES	2023-2025

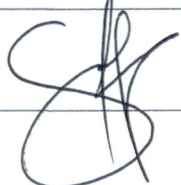
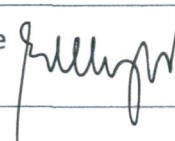
### B. DEVELOPMENT PLAN

*(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
OC4 Project Management (Intermediate)	-Formal Classroom Training -Workshop -Coaching and Mentoring -Webinar	Able to prepare research/project proposal	December 2025	Training Certificate Report of Completion		
OC5 Completed Staff Work (Advance)	-Formal Classroom Training -Webinar	Able to effectivity use the processes & methods of CSW recommends appropriate action	November 2024	Training Certificate Report of Completion		
LC2 Managing Performance (Basic)	-Formal Classroom Training -Webinar -Coaching and Mentoring	Able to provide support and define management strategies to produce innovative solutions	May 2024	Training Certificate Report of Completion		

LC1 Strategic Leadership (Basic)	-Formal Classroom Training -Webinar -Workshop -Coaching and Mentoring	Able to develop self and motivate staff to think strategically and creatively	December 2023	Training Certificate Report of Completion		
LC4 People Performance Management (Basic)	-Coaching and Mentoring -Peer Teaching	Able to Monitor and evaluate the performance commitment of staff/peers	March 2024	Weekly, Monthly and Quarterly Journal		

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: 	Date April 27, 2023	Supervisor Signature 	Date April 27, 2023
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