

# Manager Certification Program

## Development Plan

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**Participant Name:** \_\_\_\_\_

**Program Start Date:** \_\_\_\_\_

**Estimated Completion Date:** \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_

## Professional Development – The Bottom Line

**Every employee is expected to improve his/her performance and capability year after year; development is the improvement in the capability of the employee to perform in his/her current job and his/her potential to perform future roles.**

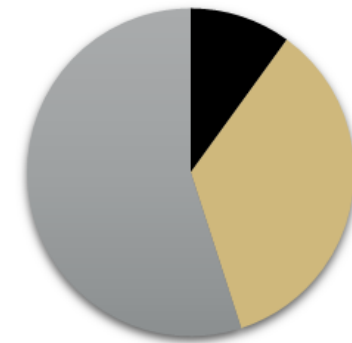
Development is about learning new skills and knowledge and the ability to apply it effectively in the workplace.

### What's in it for you?

- Better able to successfully achieve your goals
- Gratification from striving to be your best
- Opportunity to expand skills and experience for future career growth

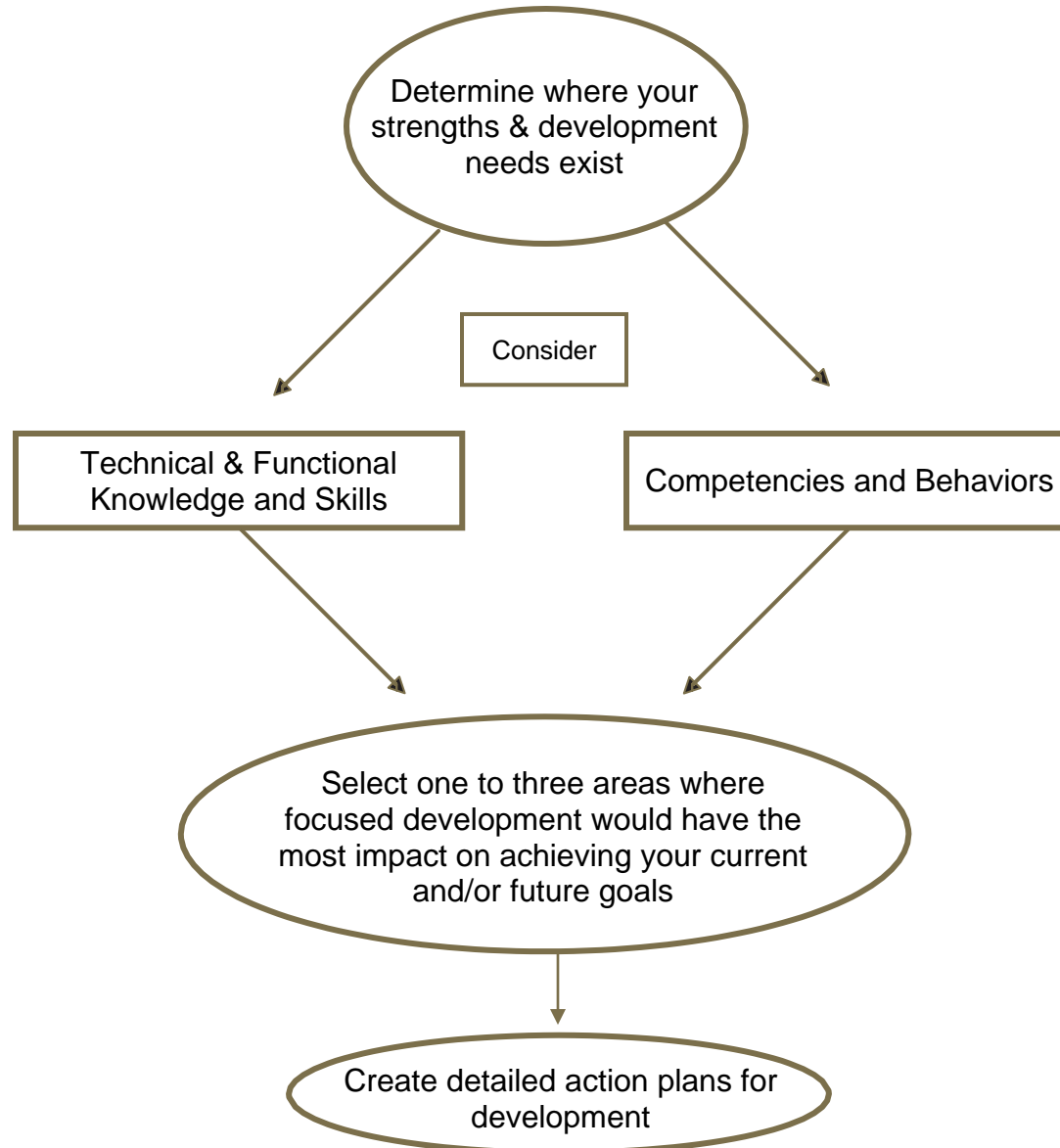
**Note:** This document is a template for use in conjunction with participating in the Manager Certification Program. Along with the program tracker, this document should be used to set goals related to each of the courses you attend and how you will use the knowledge and skills to continue to grow in your position and/or prepare for the next step in your career. Research shows that the more planning and details you build into a development plan, the more likely you will actually stick to the plan and change for the better!

### How to Develop a Leader



■ Training ■ Coaching ■ OJT Experience

# Steps in the development planning process



# Determining where to focus your 12-month development efforts

*Where will development provide you with the greatest impact for your success?*

- Review the Competencies
- Review the courses you have already taken that are associated with this program
- Consider the technical and functional knowledge and skills required for your success
- Recall prior feedback (previous performance reviews, 360 degree feedback, peer feedback, etc.) and start with the courses that will address those areas
- Determine where focused development would have the greatest impact on your ability to achieve your objectives successfully
- In addition to your annual goals/objectives, consider your career/growth goals in determining which competencies would be most impactful if developed.
- Select from one to three areas that will be most beneficial for your development (e.g., leveraging a strength, strengthening a proficiency, or neutralizing a weakness) and list them in the table below. Indicate with a check mark whether this is a strength, proficiency, or weakness.
- Review the below with your manager and sign-off that these will be the focus areas for the next 12 months.
- Development activities should include a combination of: 1) 35% coaching, 2) 55% experiential (on-the-job) learning, and 3) 10% course attendance with action plan to put skills into practice.

*I will see the greatest impact on my success by focusing development in the following areas:*

Competency/Behavior	Strength to Leverage	Proficiency to Strengthen	Weakness to Neutralize
1.			
2.			
3.			

Participant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Development Action Plan – Goal 1

**Participant Name:**

**Leader Name:**

**Competency/Behavior of Focus:**

**Development Goal 1**

*What do you want to change?  
What will result from this change?  
What would success look like?*

I will improve \_\_\_\_\_ so that \_\_\_\_\_.

I will know that I have been successful when \_\_\_\_\_.

<b>Tasks/Activities/Course</b> <i>What specific tasks/activities will you do to help reach your goal?</i>	<b>Target Dates</b> <i>When will you start/stop and complete each action?</i>	<b>Support Needed/Barriers To Overcome</b> <i>What help will you need and from whom? What barriers will you likely face?</i>
1.		
2.		
3.		
4.		
5.		

**Review your progress with your leader/mentor every 90 days.**

<b>Quarterly Update</b>	<b>Progress toward goal</b>	<b>Your Initials &amp; Date</b>	<b>Leader's Initials &amp; Date</b>
Update 1			
Update 2			
Update 3			
Update 4			

## Development Action Plan – Goal 2

<b>Participant Name:</b>	<b>Leader Name:</b>	<b>Competency/Behavior of Focus:</b>
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<b>Development Goal 2</b>  <i>What do you want to change?                  What will result from this change?                  What would success look like?</i>	I will improve _____ so that _____.  I will know that I have been successful when _____.
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Tasks/Activities/Course <i>What specific tasks/activities will you do to help reach your goal?</i>	Target Dates <i>When will you start/stop and complete each action?</i>	Support Needed/Barriers To Overcome <i>What help will you need and from whom? What barriers will you likely face?</i>
1.		
2.		
3.		
4.		
5.		

**Review your progress with your leader/mentor every 90 days.**

Quarterly Update	Progress toward goal	Your Initials & Date	Leader's Initials & Date
Update 1			
Update 2			
Update 3			
Update 4			

## Development Action Plan – Goal 3

<b>Participant Name:</b>	<b>Leader Name:</b>	<b>Competency/Behavior of Focus:</b>
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<b>Development Goal 3</b>  <i>What do you want to change?</i> <i>What will result from this change?</i> <i>What would success look like?</i>	I will improve _____ so that _____.  I will know that I have been successful when _____.
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Tasks/Activities/Course <i>What specific tasks/activities will you do to help reach your goal?</i>	Target Dates <i>When will you start/stop and complete each action?</i>	Support Needed/Barriers To Overcome <i>What help will you need and from whom? What barriers will you likely face?</i>
1.		
2.		
3.		
4.		
5.		

**Review your progress with your leader/mentor every 90 days.**

Quarterly Update	Progress toward goal	Your Initials & Date	Leader's Initials & Date
Update 1			
Update 2			
Update 3			
Update 4			

# Professional Goals

**Short-Term Goals (1 – 3 years):**

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**Midrange Goals (5 - 6 years):**

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**Long-Term Goals (10 years):**

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