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FSA-600 (08-13-93) U.S. DEPARTMENT OF AGRICULTURE Farm Service Agency INDIVIDUAL DEVELOPMENT PLAN	<i>This program or activity will be conducted on a nondiscriminatory basis without regard to race, color, religion, national origin, age, sex, marital status, or disability.</i>
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1. NAME <i>(Last, First, Middle Initial)</i>	2. UNIT - LOCATION	3. PAGE
4. PAY PLAN/SERIES/GRADE	5. CURRENT POSITION	OF
		6. FISCAL YEAR

7. No further development is desired or required at this time.	Check Box here → <input type="checkbox"/>
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8. DEVELOPMENT OBJECTIVES: KNOWLEDGE, SKILLS, ABILITIES	9. DEVELOPMENT ASSIGNMENTS	10. TRAINING: COURSES, SEMINARS, ROTATIONAL ASSIGNMENTS, ETC.	11. ESTIMATED COSTS	DATES <i>(Month/Year)</i>	
				12. PLANNED	13. ACCOMP.

14. EMPLOYEE SIGNATURE	DATE	15. A. SUPERVISOR'S SIGNATURE	DATE	15. B. SUPERVISOR'S SIGNATURE	DATE
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16. UPDATED <i>(Date & Initials)</i>	17. UPDATED <i>(Date & Initials)</i>	18. UPDATED <i>(Date & Initials)</i>
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Check applicable copy designation as shown: Supervisor's Copy Employee's Copy Training Office Copy