# Performance and Development Plan (PDP) – Expectations

## Evaluation Information

Position Description Reviewed?

Position Description Updated?

Performance Period: From       To

Purpose of Plan and Review:

If other, please specify:

## Employee Information

Last Name:       First Name:       Middle Initial:

Personnel Number:       Position Number:

Class Title:       Working Title:

Agency/Division/Unit:       Evaluator’s Name:

## Position Linkage with Organizational Mission and Strategic Plan

What is the organization’s mission and how do the duties and responsibilities of this position link or contribute to the achievement of the mission, goals, and objectives of the organization? Provide brief summary.

### Part 1: Performance Expectations

Based on the position’s major responsibilities, outline the key results and competencies expected of the employee during this performance period. Limit the list to those that are key. Check with your Human Resources office regarding any special instructions around determining what competencies to use.

## Key Results

What are the most important objectives, outcomes, and/or special assignments to accomplish in order to be successful during this time period?

## Key Competencies

What are the most important knowledge, skills, abilities, and behaviors that the employee should demonstrate in order to be successful?

### Part 2: Training & Development Needs/Opportunities

What training and development needs and opportunities should the employee focus on during this performance period?

### Part 3: Organizational Support (Optional)

Part 3 is optional and to be completed *only by the employee*, at the beginning of the performance period.

What suggestions do you have as to how your supervisor, co-workers, and/or agency management can better support you in your present job and future career goals?

## Acknowledgement of Performance Plan

The signatures below indicate that the supervisor and employee have discussed the contents of this plan at the beginning of the performance period.

*Please type your full name in the signature fields.* ***Do not*** *use E-sign features or insert signature images.*

Evaluator’s Signature:       Date:

Employee’s Signature:       Date:

**NOTE:** Typically, once the performance evaluation is completed and signed by all parties, the supervisor provides the employee a copy and the original is forwarded to Human Resources to be placed in the employee’s personnel file. Supervisors should check with their Human Resources office for organization specific instructions.