

United States Public Health Service  
 Template  
 Individual Action Plan / Individual Development Plan (IAP / IDP)



Baseline Questions	Baseline Information
Date Last Revised	
Name (First, M, Last)	
PHS Temp Rank / Grade	
PHS Serial #	
PHS Category	
Position (Title, Billet, Location)	
Education / Degrees-	
Licensure / Certifications-	
Professional Society Membership-	
Teams / Groups / Networks-	
Supervisor	
List of Advisors	

**Note:** *it is recommended that each action / activity identified within the following pages should have the following information:*

- *Target Start and Completion Dates*
- *Title / Description*
- *Activity Sponsor*
- *Event Location*
- *Number of Hours (estimated)*
- *Total Cost (estimated)*
- *Funding Source(s)*

*This content will aid the advisory in their task of providing recommendations that will balance your short term vs long term actions and also balance among professional, leadership and career development perspectives.*

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**Professional Development Perspective**

*Activities may include: education, training, licensure, certifications, professional association involvement, presentations, publications, etc.*

Target Completion Date	Short term Actions / Activities (0 to 3 years)	Estimated Cost/ Funding source

Target Completion Date	Long Term Actions / Activities (3 to 10 years)	Estimated Cost/ Funding source