

# INDIVIDUAL PROFESSIONAL

## DEVELOPMENT PLAN

## (IPDP)

*FOR MARNIE FORESTIERI*



# FOR TEACHING STAFF

Teacher's Name: _____

Position/Role: _____

Date: _____

Review Period: From _____ To _____

Supervisor/Director: _____

## 1. SELF-ASSESSMENT

**(Teacher completes this section before meeting with the Director.)**

- Strengths in teaching practice:
- Areas I want to improve:
- Long-term career goals:



# 2. PROFESSIONAL DEVELOPMENT GOALS

(Use SMART goals: Specific, Measurable, Achievable, Relevant, Time-Bound.)

**Goal #1:** _____

Why this goal matters: _____

Action Steps: _____

Support/Resources Needed: _____

Timeline/Deadline: _____

Success Indicator/Measurement: _____

**Goal #2:** _____

Why this goal matters: _____

Action Steps: _____

Support/Resources Needed: _____

Timeline/Deadline: _____

Success Indicator/Measurement: _____

**Goal #3 (optional):** _____

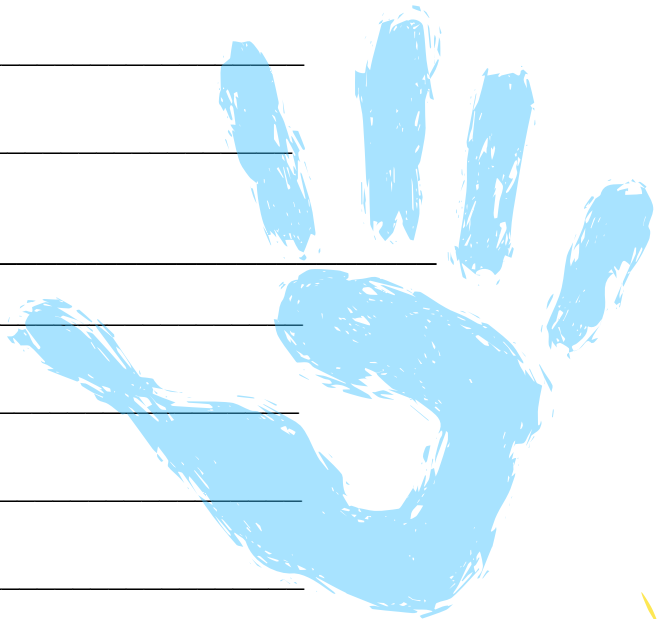
Why this goal matters: _____

Action Steps: _____

Support/Resources Needed: _____

Timeline/Deadline: _____

Success Indicator/Measurement: _____



# 3. PROFESSIONAL DEVELOPMENT ACTIVITIES

**(Check all that apply and specify details.)**

Attend in-service training: _____

Online courses/CEUs: _____

Peer observations/coaching sessions: _____

Conferences/workshops: _____

Curriculum training: _____

Other: _____

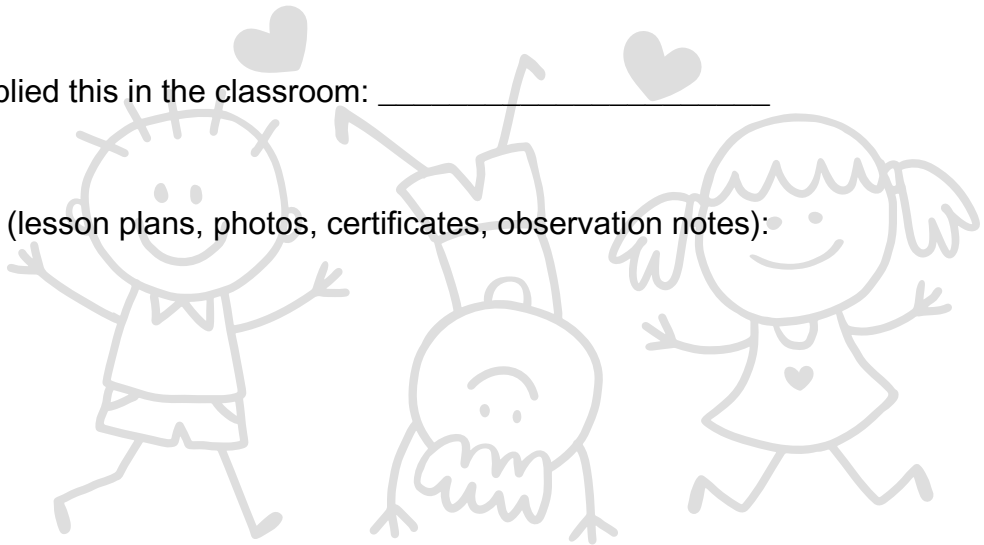
# 4. DOCUMENTATION & REFLECTION

Date(s) completed training: _____

Key learning takeaways: _____

How I applied this in the classroom: _____

Evidence (lesson plans, photos, certificates, observation notes):



# 5. DIRECTOR FEEDBACK & SUPPORT PLAN

**Director's comments on teacher's progress:**

Additional resources/support to be provided:

Next observation date: _____

# 6. SIGNATURES

Teacher Signature: _____ Date: _____

Onboarding Coach Signature: _____ Date: _____

Director Signature: _____ Date: _____