



PROFESSIONAL DEVELOPMENT PLAN
 Academic Year _____ - _____

**The PDP is completed annually by annual contract faculty and biannually by continuing contract faculty.
 Outcomes are NOT completed at the time the plan is developed.**

Legal Name: _____
Last First Middle (complete) Jr., etc.

Division: _____ **Date:** _____
MM/DD/YY

Dean/AVP: _____

Area 1: Teaching

Goals	Activities	Outcome for Year

Area 2: Service to Students

Goals	Activities	Outcome for Year

Area 3: Professional Development

Goals	Activities	Outcome for Year

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Area 4: College Service

Goals	Activities	Outcome for Year

Area 5: Public Service

Goals	Activities	Outcome for Year

COMMENTS/REMARKS:

Faculty Signature	Date:	MM/DD/YY
Dean/AVP Signature	Date:	MM/DD/YY
VPIA Signature	Date:	MM/DD/YY