MCAS CHERRY POINT
CIVILIAN CAREER LEADERSHIP AND DEVELOPMENT

MENTOR ACTION PLAN

PRIVACY ACT STATEMENT

Under the AUTHORITY 5 U.S.C. 1302 and E.O. 9397 (SSN), this form is for official use only. The PURPOSE of this form is to provide the Office of Personnel Management and other official repositories for records maintain general personnel records, reports of personnel action, and the documents and papers required in connection with these actions effected during an employee's Federal service. ROUTINE USES of this form can disclose information to a Federal agency in the executive, legislative, or judicial branch of government, in response to its request, or at the completion of the agency maintaining records, information in connection with the transferring or separation of an employee and the debriefing of a security clearance. DISCLOSURE is MANDATORY for proper documentation, filing and maintaining of separating Federal employees.

Participant's Name: _____

Mentor's Name: _____

Organization / Department: _____

1. I plan to focus on the following principle(s) of Leadership Effectiveness and/or Functional/ Technical development to enhance my professional growth this year:

2. These are the goals I have set for myself within these principles. (Refer to the statements of required knowledge, dispositions, and performances for the principle you have chosen to assist you.)

3. This is how I believe the successful accomplishment of my goals will lead to improved leadership and/or functional/technical development.

4. This is how I plan to evaluate my progress toward reaching my goals. (How, checkpoints, indicators of success, etc.)

We agree to work together as a collaborative team to implement this plan.

Participant's signature: _____ Date: _____

Mentor's signature: _____ Date: _____

Provide a copy of this form to the Training Support Department - Bldg. #4335 / Room 129.

Keep the original for your files.
Evaluate and reflect on your progress twice during the year, mid year, and at the end of the year.