IPPD Form 1 – TEACHER'S INDIVIDUAL PLAN FOR PROFESSIONAL DEVELOPMENT (IPPD)								
School Year :								
Name of Teacher :			Position :					
School:	District:		Division : Catanduanes		Region: V (Bicol)			
Professional Development Goal :								
OBJECTIVES	METHODS/STRATEGIES	RESOURCES	TIME FRAME	SUCCESS INDICATOR				
(What competencies will I enhance?)	(What professional activities will I undertake to achieve my objective?)	(What will I do to access resources?)	(When do I expect to have accomplished the activities?)	(What NCBTS competencies would I have enhanced?)	(What learners' performance would have been improved?)			
А.								
В.								
С.								
D.								
Ε.								
F.								
G.								
Н.								
professional development, not only for	am responsible for my personal an my benefit but also for my school		f all , for my learner's progre		ives I have set hereunto for my			
Signature: Teacher			Date:					
Attested by: Peer			Date:					
Advised By :								
School Head					_			

IPPD Form 3: SELF – MONITORING CHECK (To be completed at mid-year and end of calendar year )								
	1. Am I always conscious of my professional development goal and objectives?							
	(Write your objectives in the first column.) 2. What have I accomplished so far? (Write activities you have done and the specific NCBTS competencies that have been enhanced in the appropriate columns.)							
Self- Monitoring Check			ACCOMPLISHMENTS					
	Objectives Set	Time of the Year	PROFESSIONAL DEVELOPMENT	SPECIFIC NCBTS				
			ACTIVITIES DONE	COMPETENCIES ENHANCED				
		Mid						
		End						
		Mid						
		End						
		Mid						
		End						
		Mid						
		End						

## IPPD Form 3: SELF – MONITORING CHECK (To be completed at mid-year and end of calendar year )