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**Individual Development Plan (IDP) for**

**University of Maryland School of Medicine PhD Candidate Graduate Students**

**Name of Graduate Student:** **Review Date:         
  
Mentor:       Program: Molecular Microbiology & Immunology**

**Start date in lab:** **Anticipated end date:**

**Primary funding source for student stipend (include Activity and Institute Code for NIH grants, i.e. AI R01):**

The Graduate Program in Life Sciences is committed to providing a top-tier research training environment for graduate students. To further support the development of graduate students in their trajectory towards independent careers, the Graduate Program in Life Sciences is pleased to provide the Individual Development Plan (IDP) as a mentoring guidance document. Once completed, please turn in to your program administrator.

**Goals:**

* Provide constructive feedback to trainees regarding their progress during the past year.
* Identify trainee’s short-term research project goals to promote enhanced productivity.
* Identify trainee’s professional development needs, long term goals and foster career growth.
* Help ensure trainee’s expectations and goals are aligned with those of the faculty advisor.

**Instructions**

**Graduate Students** should complete Section A and provide their complete responses to their faculty mentor prior to the scheduled review meeting. During this review meeting, both parties will discuss the graduate student’s responses. **Faculty Mentors** will provide Section B. This is designed to elicit feedback on the student’s overall performance as well as targeted areas for improvement.

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| **Part A (completed by Graduate Student )** |

**SUMMARY OF YOUR RESEARCH PROJECT**

**Initial IDP:** *Briefly* *describe the aims and experimental approaches of your research project. What is the significance of the research? Are collaborations or use of specialized resources/cores anticipated? If yes, indicate formal arrangements. (1/2 page sufficient)*

***OR***

**Annual IDP:** *Briefly summarize your research project and major accomplishments in the past 12 months*

**2. What new skills and education/training in new research areas would enhance your project and your professional development?**

**3. CV should be included.**

**4. Selection of Thesis Committee** *– if you have selected your thesis committee, please list the members here.* )

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| --- | --- | --- |
| **Thesis Committee Member Name** | **Department** | **Graduate Faculty Status** |
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**PLANS FOR COMING YEAR**

**1. List research project goals**

**2. Scholarship or other funding applications planned for the upcoming year**

**3. Potential collaborations in the coming year, if appropriate**

**4. Plans for improving scientific writing and oral presentation skills in coming year. Brief outline of accumulating results toward a research paper or presentation in coming year.**

**5. Which professional societies are you a member or wish to become a member of?**

**6. Which of the following workshops and seminars offered by GPILS or by partner groups on campus have you attended or do you plan to attend?**

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| --- | --- | --- |
|  | **Yes** | **Plan** |
| NRSA Workshop |  |  |
| Getting your research published |  |  |
| Presenting your research |  |  |
| Scientific Leadership and Project Management |  |  |
| Networking |  |  |
| Writing a CV or resume |  |  |
| Individual consultation |  |  |
| “Careers in Science” seminar |  |  |
| Other |  |  |
| Other |  |  |

**CURRENT CAREER GOALS**

List your primary career goal and several alternatives if appropriate. If close to completion/graduation, what are your plans for your next position? (Career options may be explored at http://myidp.sciencecareers.org)

Signature of Faculty Mentor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_

Signature of Graduate Trainee\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

*By signing this form, both parties confirm that they have* ***discussed*** *all items outlined in the document.* ***This form summarizes their discussion; it does not constitute a binding contractual agreement between the parties.***

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| **Part B: (completed by the Faculty Mentor)** |

**Please summarize the following points:**

* Research project progress.
* Trainee’s strengths.
* Trainee’s capabilities and performance needing improvement.
* Comment on the Graduate Trainee’s supervisory and/or group management skills, oral and written communication skills, and participation in group meetings and seminars.
* Additional major points discussed during the IDP meeting

**Additional topics that may be addressed below:**

* Is the Graduate Trainee’s career development on-track?
* What skills should the trainee improve or acquire in order to advance his/her career?
* If performance has been unsatisfactory, what are the specific goals that the trainee must meet?
* How can the Graduate Program in Life Sciences as a whole or the Molecular Microbiology and Immunology Program assist in helping your trainee achieve his/her overall goals?

Signature of Graduate Trainee\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

Signature of Faculty Mentor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_

*By signing this form, both parties confirm that they have* ***discussed*** *all items outlined in the document.* ***This form does not constitute a binding contractual agreement between both parties.***

Signature of Program Director\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For assistance/guidance, please contact GPILS Director of Career Development:** [jaumiller@som.umaryland.edu.](mailto:jaumiller@som.umaryland.edu.)

**Additional resources and discussion** regarding IDPs are available widely, including via FASEB and Science Careers, e.g.:

<http://www.faseb.org/portals/2/pdfs/opa/idp.pdf>

<http://myidp.sciencecareers.org>

**SUGGESTIONS TO IMPROVE IDP PROCESS AND FORMS**

We would like to improve the IDP process and forms continuously. We would appreciate your constructive suggestions, which will be treated confidentially. If you prefer, please provide written or oral suggestions separately to Jennifer Aumiller **jaumiller@som.umaryland.edu.**