

DEPARTMENT OF HOMELAND SECURITY  
U.S. Coast Guard  
**EXECUTIVE DEVELOPMENT PLAN (EDP)**

**PRIVACY ACT STATEMENT**

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act Statement serves to inform you of the following concerning the collection of the information on this form.

**AUTHORITY:** 14 U.S.C. §505; 5 C.F.R. § 412.401

**PURPOSE:** United States Coast Guard (USCG) Flag Officers and Senior Executives will use this information to permit effective individual executive developmental planning.

**ROUTINE USES:** Authorized USCG personnel will utilize this information to assist USCG Flag Officers/Senior Executives and their supervisors in executive development and goal setting. Any external disclosures of data within this record will be made in accordance with DHS/USCG-014, Military Pay and Personnel, 76 Federal Register 66933, October 28, 2011, and OPM/GOVT-2, Employee File System Records, 71 Federal Register 35342, June 19, 2006.

**CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION:** Providing this information is voluntary. However, failure to provide this information may have an impact on future assignments or leadership opportunities.

**FLAG OFFICER/SENIOR EXECUTIVE**

Name	Unit	Title
Office Phone	Supervisor Name/Title	

How did you identify the development needs reflected on this Plan? Please check all that apply:

- Executive-level leadership assessment that includes employee feedback
- Peer, Customer, or other Stakeholder feedback
- Current or future performance needs based on supervisor observation
- Current or future performance needs based on self-assessment
- Other (If other, list here.)

**EXECUTIVE DEVELOPMENT PLAN CONCURRENCE**

Per the signatures and dates below, I will pursue completion of all requirements under the Capstone tier and additional leader development activities identified in this plan, as supported by my supervisor.

Executive Signature:	Supervisor of Record Signature:
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**CAPSTONE TIER REQUIREMENTS FOR ALL USCG EXECUTIVES**

Requirements (Select the developmental programs appropriate for your tenure. See page 5 for more information.)	Developmental Activity Completed	Completion Date
If a <b>NEW Flag Officer</b> : <a href="#">DOD CAPSTONE General and Flag Officer Course</a>		
If a <b>NEW SES</b> : <a href="#">DHS Executive Capstone Program</a>		
If an <b>EXPERIENCED Flag Officer/SES</b> : Address requirements on page 5.		

**OVERALL DEVELOPMENT GOALS**

Development Goals <i>[Below are placeholders for any development goals that may be linked to performance goals]</i>	Competency to be Developed	Skill(s) to be Demonstrated	Development Activity *If experiential, please complete addendum.	Completion Date	Did you achieve the learning objective(s) established for this development plan?
Development Goal #1: Link to Performance Plan Goal #					<input type="checkbox"/> Complete <input type="checkbox"/> Incomplete
Development Goal #2: Link to Performance Plan Goal #					<input type="checkbox"/> Complete <input type="checkbox"/> Incomplete
Development Goal #3: Link to Performance Plan Goal #					<input type="checkbox"/> Complete <input type="checkbox"/> Incomplete

**END OF THE EDP FORM**

Continue to the Next Page IF You Are Using a Developmental Assignment, Detail, or Acting Position to Meet Your Developmental Goals.

## Experiential Development Addendum IF You Have Completed A Developmental Assignment

**Only required if you are using a developmental assignment, detail, or acting position outlined below to meet your developmental goals.**

Name: \_\_\_\_\_ Title/Position of Record: \_\_\_\_\_

**Type:**     Rotational/Developmental Assignment (internal and external)                       Intergovernmental Personnel Act (IPA) Mobility Program

Rotational/Developmental Assignment as part of a formal development program                       Detail                       Acting Role

Sabbatical                       Mentoring Agreement                       Coaching Agreement                       Shadowing

Other (*If other, list the activity here.*)

Dates/Duration: \_\_\_\_\_

Assignment Position/Organization (*if applicable*): \_\_\_\_\_

1) Shared with others in your home organization (*presentation, paper, briefing, other*)?

**Re-integration Plan**                      2) Applied in your role in the home organization (*change of duties, specific new projects, or increased performance*)?

**Use the space below to outline expectations/evidence of development for your experiential activity.**

### Competencies: (*list all intended for development*)

Pre-Experience Intention	Response
Why/how did you choose this activity?	
What are your expectations of this development? What do you hope to learn about this/these competencies?	
Post-Experience Reflection	Response
What did you observe or learn during your development in this/these competency area(s)? Did anything surprise you?	
What, if any, are the behaviors that you observed or learned will you incorporate back on the job? What will you do differently?	

## YOUR EVALUATION OF THE EXPERIENTIAL DEVELOPMENT ACTIVITY

Feedback Questions	Immediate Feedback					Follow-Up Feedback (6 months after completion)				
	Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1. The format of this developmental activity was conducive to my ability to apply knowledge on the job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. This activity gave me knowledge or skills that I did not gain from on-the-job experience.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Applying the knowledge and skills from this activity will make me more effective in leading DHS mission execution.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I consider this activity to have been a worthwhile investment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I would recommend this developmental activity to a colleague at my leader level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I have the support of my supervisor in applying what I have learned back on the job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I gained broader perspectives that increased my ability to collaborate across boundaries.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I have new knowledge about organizational processes, practices or programs that I can take back to my organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I was able to bring knowledge and skills to improve processes, practices or programs in my rotational organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Use the space below to enter any comments you have about your experiential development**

## YOUR SUPERVISOR'S EVALUATION OF THE EXPERIENTIAL DEVELOPMENT ACTIVITY

If the Experiential Development Activity is a formal rotation, detail, IPA, or "Acting" assignment, this section must be completed by the individual who supervises the Executive in their position of record (and is recommended for other experiential development). Thinking about the Executive who completed the rotation, please respond to the following items.

<b>Supervisor Name/Title</b>	<b>Supervisor Signature</b>
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What, if any, positive behavioral changes have you noticed in the Executive following the rotation/experiential development that were not present prior to the rotation?

How have you been able to leverage the Executive's newly-gained knowledge, skills, abilities, perspective, etc. to further the goals of your own organization now that they have returned to duty?

Would you support your other Executive subordinates if they desired to take on a rotational assignment? Why or why not? How has the current Executive's rotation experience influenced your opinion of rotations/formal experiential development?

## INSTRUCTIONS

**PURPOSE:** Executive development plan (EDP) is to serve as a blueprint for all developmental activities to strengthen your skills, demonstrate your commitment to continuous learning, and assist you in meeting the Coast Guard's need for leadership and managerial improvement as well as organizational results.

**GUIDING INSTRUCTION:** [COMDTINST 5351.1, CG Leadership Development Program](#) provides official guidance and information on executive development.

## FLAG OFFICER / SENIOR EXECUTIVE

### REQUIREMENTS:

**If a NEW Flag Officer:** [DOD CAPSTONE General and Flag Officer Course](#) as mandated by the Goldwater-Nichols DoD Reorganization Act of 1986 for all newly selected flag officers.

**If a NEW SES:** The [DHS Executive Capstone Program](#) is a required training for all DHS executives within their first year of hire or promotion to an SES position.

[DHS Executive Capstone Program](#) consists of 3 multi-day instructor-led sessions featuring the following workshops and onboarding activities:

- | **Executive as a Leader:** Discussions with seasoned DHS executives and a developmental session focused on DHS executive leadership challenges.
- | **DHS Operational Construct:** Briefings and site visits to showcase component contributions and broaden executive awareness of the DHS operations.
- | **The DHS Enterprise:** Briefings and site visits to demonstrate unity of effort across the interagency and with state, local, tribal and community partners.
- | Executive Onboarding, E90X (*In the first 90 days after EOD in the executive position*)
- | Welcome Kit (*including: Welcome Letter-DHS Secretary and Onboarding Checklist*)
- | 8 hours of Mentoring (*with an Executive Sponsor*)
- | **A DHS issued 360° Leadership assessment with employee feedback**
- | Interactive Group Orientation

**If an EXPERIENCED Flag Officer/SES beyond your first year:** The [DHS Leader Development Program](#) requires supervisors, managers, and executives beyond their first year to meet the following requirements:

**1) Complete 2 annual requirements** commonly known as "12/12" as described below:

**a) 12 Hours of Competency Development** (*annual*): Self-development in the following executive core skills:

- | Empathy
- | Emotional intelligence
- | Evaluate political implications of decisions
- | Motivate employee commitment
- | Authenticity
- | Goal setting
- | Develop and implement a meaningful employee recognition system
- | Develop, justify, and manage organization-wide budget
- | Recognize leadership potential in others and recommend appropriate development

**b) 12 Hours of Leader-As-Teacher "Give Back"** (*annual*): Choose any one or all of the following activities: Become a guest speaker coach or mentor, or write an article on leadership. (*Note: This is not a comprehensive list.*)

**2) Required by USCG, a 360° leadership assessment with employee feedback** is to be completed every 2 years.