

## LEARNING CONTRACT

<b>TARGET DATE FOR COMPLETION</b>

**COMPETENCY: WHAT NEEDS TO BE ADDRESSED?**

**OBJECTIVES: WHAT (SPECIFICALLY) DO I WANT TO LEARN?**

**ALIGNMENT: HOW DOES/DO OBJECTIVE(S) SUPPORT MY PROGRAM'S AND APHIS' STRATEGIC PLAN AND MANAGEMENT PRIORITIES; THE HUMAN CAPITAL PLAN?**

**APPLICATION: HOW DO I PLAN TO APPLY WHAT I LEARN?**

**STRATEGY: WHAT WILL I DO TO OBTAIN THIS KNOWLEDGE/SKILL? (BOOK/TAPES/COURSES/DISCUSSION GROUPS/TDY DETAILS) FILL IN BELOW:**

WHAT	WHEN	HOURS	COST

<b>PRINTED NAME OF LEARNER</b>		<b>PRINTED NAME OF LEARNER'S SUPERVISOR</b>	
<b>SIGNATURE OF LEARNER</b>	<b>DATE</b>	<b>SIGNATURE OF LEARNER'S SUPERVISOR</b>	<b>DATE</b>