|  |  |  |  |
| --- | --- | --- | --- |
| **Project Name:** |  | **Project ID:** |  |
| **Business Owner:** |  | Charter Date: |  |
| **Business Owner Department:** |  | **Strategic Objective:** |  |
| **Executive Sponsor:** |  | **IT Program:** |  |

## Project Description and Purpose:

What is the purpose and/or the business need for this project? What problem or opportunity is being addressed?

|  |
| --- |
|   |

## Scope DefinitionandLimitations:

What work will be included as part of this project? What work will **not** be included as a part of this project?

|  |
| --- |
| **Project Scope Summary***Provide a high-level description of the features and functions that characterize the product, service, or result the project is meant to deliver.* |
|  |
| **In Scope** | **Out of Scope** |
|  |  |
|  |  |
|  |  |

## Project Objectives, Requirements & Success Measures

What are the goals of the **sponsor** for this project? What business requirements does the **sponsor** indicate would signify a successful project outcome? When during or after the project would the metric(s) be taken?

|  |  |  |
| --- | --- | --- |
| Objective/Requirement | Success Measure | Target Timeframe |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

## Project Deliverables

Define the key, high-level outcomes or outputs that are required for the project to reach the projects objectives and goals?

|  |  |
| --- | --- |
|  | Deliverable |
| **1.** |  |
| **2.** |  |
| **3.**  |  |
| **4.** |  |
| **5.** |  |

## Assumptions and Constraints:

|  |
| --- |
| Assumptions *Specify all factors that are, for planning purposes, considered to be true.* |
| 1. |  |
| 2. |  |
| Constraints *Identify restrictions that limit or place conditions on the project, especially associated with the project scope.* |
| 1. |  |
| 2. |  |

1. **Risk Assessment:**

What risks are associated with implementation of this project? Who will be responsible for addressing these risks and how?

|  |  |
| --- | --- |
| Risk | Mitigation |
|  |  |
|  |  |
|  |  |
|  |  |

1. **Scheduling Requirements (Anticipated Timeline):**

Is there an anticipated completion date for this project? If so, please indicate and explain.

|  |
| --- |
|  |

1. **Resource Requirements:** *What resources—people, material, or financial—are needed for this project? Please include an approximate number of hours required for people resources – even if there is no direct cost associated.*

|  |  |  |
| --- | --- | --- |
| **Will funding be required for this project?** | [ ]  **No** | [ ]  **Yes** |
| **Total Budget Estimate:** | $ |
| **Resource Requirement Breakdown** |
| **Needs/Investment** | **Description** | **Hours/Cost** |
| Staffing – Technical |  |  |
| Staffing – Functional |  |  |
| Consultation |  |  |
| Training/Documentation |  |  |
| Hardware |  |  |
| Software |  |
| Other |  |
| **Additional Resource Information** |
|  |

## Project Stakeholders:

| Project Team & Stakeholders |
| --- |
| Name | Role on Project Team | Department | NetID/Contact Info |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Authorization/Charter Approval:**

*Type the name of each Project Team Member and their title and route for electronic signatures.*

| Name | Project Role | Digital Signature |
| --- | --- | --- |
|  | Executive Sponsor |  |
|  | Business Owner |  |
|  | IT Team Lead |  |
|  | IT Director |  |
|  | IT AVP |  |
|  |  |  |
|  |  |  |
|  |  |  |