**Section 1: Requester Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | | |
| **Department:** |  | **Position:** |  |
| **Email:** |  | **Phone Number:** |  |
| **Date of Request:** |  | | |

**Section 2: Project Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Title:** |  | | |
| **Project Description:** | *(Provide a brief overview of the project, including objectives and goals)* | | |
| **Project Type:** | New Project | Enhancement | Research |
| Other (please specify): | | |
| **Desired Start Date:** |  | **Desired Completion Date:** |  |
| **Project Priority:** | High | Medium | Low |

**Section 3: Business Justification**

|  |  |
| --- | --- |
| **Purpose of the Project:** | *(Explain the need for this project and its significance to the organization)* |
| **Expected Benefits:** | *(List the anticipated benefits, such as cost savings, process improvements, revenue generation, etc.)* |
| **Impact if Not Approved:** | *(Describe the potential impact or risks if the project is not undertaken)* |

**Section 4: Scope and Requirements**

|  |  |
| --- | --- |
| **Scope of Work:** | *(Outline the scope of the project, including major deliverables and key milestones)* |
| **Specific Requirements:** | *(Detail any specific requirements, resources, or constraints related to the project)* |
| **Key Stakeholders:** | *(List key stakeholders and their roles)* |
| **Dependencies:** | *(Identify any dependencies or related projects)* |

**Section 5: Resource Requirements**

|  |  |  |  |
| --- | --- | --- | --- |
| **Estimated Budget:** |  | **Funding Source:** |  |
| **Personnel Required:** | *(List the roles and estimated time commitment for each role)* | | |
| **Other Resources Needed:** | *(Specify any additional resources needed, such as equipment, software, etc.)* | | |

**Section 6: Approval**

* Requester Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Date:
* Manager/Supervisor Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Date:
* Department Head Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Date:
* Additional Approvals (if required):
  + Name/Position:
  + Date:

**Section 7: Project Review (For Office Use Only)**

* **Received By:**
* **Date Received:**
* **Project Number:**
* **Review Comments:**

**Additional Notes**

* Please attach any supporting documents or additional information that may assist in the project evaluation.
* Submit the completed form to the Project Management Office (PMO) or the relevant approving authority.