# Enterprise Systems Project Request Form

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| --- | --- |
| Requesting Department: |       |
| Submitted By: |       | Date: |       |
| Desired Start Date: |       | Desired Delivery Date: |       |
| Project Title: |       |  |  |
| [ ]  Check this box if the project is mandated by a federal, state, or other regulatory office. |
|  |

## Instructions

The purpose of this form is to provide the Enterprise Systems with enough understanding about a project so proper decisions, recommendations, internal and external coordination can take place to move the project forward. Please use your discretion when answering the questions below.

## Project Sponsors

|  |  |  |
| --- | --- | --- |
| Name/Title | Email | Phone |
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## Project Description

Provide a simple, high-level description of the project. It should clearly state the overall business goal of the initiative. If the description is highly technical or utilizes acronyms, please provide a one paragraph summary in layman’s terms of the project.

## Project Justification

A simple, high-level description of the benefits the project will provide. This might include items such as costs savings or service improvements. Include the types and numbers of affected customers.

## Project Dependency

Provide a list of any components, systems, or other reliance that needs to be involved in this project. Please include the type of impact this will have on your project.

## Project Measures

Provide the measures you will put in place to determine whether this project was a success.

## Does this project support a University, Campus, or Department strategic plan?

If you answered yes, please explain how.

## Resource Requirement

To the best of your ability, estimate the costs of this project in material costs and labor hours for both initial expenditure/purchase and recurring maintenance.

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| --- |
| **Labor** |
| **Resource Type (Role)** | **Department/Campus** | **Estimated Hours** | **Description of Work** |
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|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Hours:** |  |  |

|  |
| --- |
| **Other Costs** |
| **Cost Type** | **One-Time Costs** | **Recurring Cost Per Year** | **Explanation** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Sum:** |  |  |  |
| **Total Cost:** |  |