## Project Charter

1. General Information:

Project Title – The proper name used to identify this project; Document Date – The date this draft/revision was written; Sponsoring Organization – The organization sponsoring this project; Sponsor Representative – The name of the person representing the Sponsoring Organization; Prepared by – The person(s) preparing this document; Version – Version of this document.

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| Project Title: |  | Date: |  |
| Sponsoring Organization: |  | Sponsor Representative: |  |
| Prepared by: |  | Version: |  |

1. Project Stakeholders:

Business Representatives

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| --- | --- | --- | --- |
| **Position** | **Name/Title/Organization** | **Phone** | **E-mail** |
| **Executive Sponsor** |  |  |  |
| **Business Owner** |  |  |  |
| **etc.** |  |  |  |

Functional Representatives (these individuals will be required to sign-off on this project charter). Please feel free to add columns for additional stakeholders.

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| **Position** | **Name/Title/Organization** | **Phone** | **E-mail** |
| **Product Management** |  |  |  |
| **Network Engineering** |  |  |  |
| **Customer Operations** |  |  |  |
| **Software**  |  |  |  |
| **Sales**  |  |  |  |
| **Finance** |  |  |  |
| **Network Operations** |  |  |  |
| **Legal** |  |  |  |
| **Marketing** |  |  |  |

1. Executive Summary

Provide a brief and concise overview of this project.

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1. Project Purpose

Explain the reason(s) for doing this project.

Business Need / Problem

The Business Need / Problem is an issue or opportunity pertaining to the business which needs to be resolved / acted upon. State in specific terms the issue or opportunity this project will address. Often, the Business Need / Problem is a critical business issue or initiative in the Sponsoring Organization’s Strategic Plan.

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1. Project Overview
	1. Project Objectives

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* 1. Project Scope

The project scope is an overview of the work done during the term of resource assignment. No matter how many phases, releases, etc are in this project, the Project Scope describes what must be accomplished to consider the project “done.” This section details what the project is going to deliver. All information populated in this section is considered “in scope.”

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* 1. Out of Scope

Please list deliverables that are out-of-scope for this initiative.

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* 1. Assumptions

Assumptions are statements taken for granted or accepted as true without proof. Assumptions are made in the absence of fact. List and describe the assumptions made in the decision to charter this project.

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* 1. Project Success Criteria

List and describe the success criteria for project completion. The project cannot be formally closed out without meeting the success criteria.

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1. Project Requirements / Deliverables

The Project Requirements / Deliverables define what the project must accomplish, including the customer/ user requirements and products / services to be provided by the project.

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| *Project Requirements/Deliverables* | *Estimated Complete Date* | *Resource* |
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1. Project Costs / Budget

Identify the initial funding required by the project and/or committed to this project by the project sponsor. Add links or create appendices as needed. Additional funding may be requested / committed upon completion of the detailed project plan.

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1. Project Risks

Risks are statements of issues or problems that have the potential to arise but have not yet occurred. List and describe the initial risks for this project and planned mitigation.

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1. Known Project Constraints

Identify any constraints currently known about this project that will affect the “Triple Constraints” (budget, schedule, resources) or any other known constraints for this project. If there are no constraints, note that fact.

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|  | **Project Constraint Type** | **Description of the Constraint** |
| 1. | <Budget Constraint> | <Ex: $100,000 of funds has been identified for this project. No other funding is available. Features that cannot fit into this constraint could be listed as future enhancements.> |
| 2. | <Schedule Constraint> | <Ex: this project must be done by August 15 to meet license renewal deadline.> |
| 3. | <Resource Constraint> | <Ex: John Smith is the only person who has the skills to complete the work to build this system.> |
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1. High Level Project Schedule / Milestones for Project Planning

Please highlight estimated key project planning deliverables along with target completion dates and known business dependencies (e.g., Need to launch by X date due to dependency on license renewal). Any project milestones or major project activity that will happen during this period of time should be added to the High Level Schedule. Below content provided as a **samp**le only.

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| **Milestone**  | **Start Date** | **Completion Date** |
| **Project Initiation** |  |  |
| Develop Project Charter |  |  |
| Evaluate Project Charter |  |  |
| Approve Project Charter |  |  |
| **Project Planning (High Level)**  |  |  |
| Prepare for the Project |  |  |
| Conduct Project Kick – Off Meeting |  |  |
| Develop the Project Initiation Plan |  |  |
|  Define the Goal, Specific Objectives, & Success Criteria |  |  |
|  Define Project Scope |  |  |
|  Develop the High Level Schedule and Document Assumptions |  |  |
|  Identify and Document Stakeholder Involvement |  |  |
|  Develop the Communication Plan |  |  |
|  Establish the Project Budget |  |  |
|  Define Governance and Resourcing |  |  |
|  Define the Management Approaches |  |  |
|  Develop the High Level Risk Plan |  |  |
| Submit the Project Initiation Plan for Approval |  |  |
| Confirm Approval to Proceed- Approved Project Initiation Plan |  |  |
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**Assumptions that affect the High-Level Schedule:**

1. Resource Requirements for Project Planning

*Define the make-up of the project resources for the development of the High Level Plan and any other activities that will be done during this period. Include those specific individuals that have been identified and also show those that need ‘To Be Determined’ (TBD).*

**Table 1:** List the names of all individuals needed to perform the work described in the Project Charter and whose participation must be approved by the Manager of the Resource

| **Project Initiation Team Role** | **No.** | **Who****(if known)****or TBD** | **% Time or Hours** | **Dates Needed****(Date Range)** | **Name of Manager** |
| --- | --- | --- | --- | --- | --- |
| <Ex: Business Analysts | 1 | TBD | 30%  | MM/DD/YY-MM/DD/YY> |  |
| <Ex: Project Manager | 1 | TBD | 50%  | MM/DD/YY-MM/DD/YY> |  |
| <Ex: Technical Analyst | 1 | TBD | 30%  | MM/DD/YY-MM/DD/YY> |  |
| <Ex: Subject Matter Experts | 5 | TBD | 10 hrs ea | MM/DD/YY-MM/DD/YY> |  |
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**Resourcing comments, constraints, and/or issues:**

1. Approval Signatures

*The Sponsor(s) should indicate approval or rejection of this Project Charter by checking the* ***Approve*** *or* ***Reject*** *box. If a Sponsor is rejecting the charter, he/she must indicate the reason in the comments field.*

*The Sponsor(s) indicate final acceptance of this Project Charter (including securing individual resources) by providing his/her signature in the* ***Project Sponsor Signature*** *box and the approval date in the* ***Date*** *box.*

**Executive Sponsor(s)**

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| **Name** | **Action** | **Comments** | **Signature** | **Date** |
|  | Approve: 🞎 Reject: 🞎 |  |  |  |
| etc. | Approve: 🞎 Reject: 🞎 |  |  |  |

**Project Directors and/or Sponsors**

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| --- | --- | --- | --- | --- |
| **Name** | **Action** | **Comments** | **Signature** | **Date** |
|  | Approve: 🞎 Reject: 🞎 |  |  |  |
| etc. | Approve: 🞎 Reject: 🞎 |  |  |  |

**Approvers**

*Agreement to Secure Required Resources*

*The Approver is the person(s) or group that has the authority to commit resources for this project. He/she indicates his/her agreement to provide required resources for Project Planning (High Level) by providing his/her Approver Signature and the approval Date.*

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| --- | --- | --- | --- | --- |
| **Name** | **Action** | **Comments** | **Signature** | **Date** |
|  | Approve: 🞎 Reject: 🞎 |  |  |  |
| etc. | Approve: 🞎 Reject: 🞎 |  |  |  |