**PROJECT CHANGE REQUEST FORM**

|  |
| --- |
| **Project Name: IB Fee Income** |
| **Prepared by:**  |
| **Date :**  |
| **Change Request No.: IBSCR011** |

|  |
| --- |
| **1. Requestor Information** |

*Fill in with appropriate information or place an “X” next to those that apply:*

**Area of Change:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Scope**  | **[ X ]** | **Schedule**  | **[ ]** | **Migration** | **[ ]** |
| **Budget**  | **[ ]** | **Quality**  | **[ ]** |  |  |

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| **Is this Change the result of a Risk Management Action?** |
| **No** **[ ]** | **Yes** **[ ]** | **Risk ID:** |

**Scope of Change:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Information Site GUI**  | **[ ]** | **BVMC**  | **[ X ]** | **CIB Reports**  | **[ ]** |
| **Information Site Tools**  | **[ ]** | **CORUS**  | **[ ]** | **BIB Reports**  | **[ ]** |
| **Content**  | **[ ]** | **CIB Demo**  | **[ ]** | **BIB User Guide**  | **[ ]** |
| **Database**  | **[ ]** | **BIB Demo**  | **[ ]** | **CIB User Guide**  | **[ ]** |
| **ESB**  | **[ ]** | **OnlineApps IBG Core** | **[ ]** | **BVMC User Guide** | **[ ]** |
| **CIB** | **[ X]** | **BIB** | **[ X]** | **Others** | **[ ]** |
|  |  |  |  |  |  |

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| ***Proposed Change Description and References:****Provide information below concerning the requested change. Create links to any supporting documentation* |
| **Description:** |
| **Justification:** |

|  |  |
| --- | --- |
| **Hyperlinks:** |  |

|  |  |
| --- | --- |
| **Impact of Not Implementing:** |  |
| **Proposed Change:** |  |

**Alternatives: f the Change Request**

|  |  |
| --- | --- |
| **Initial Review Date:** | **Assigned To:**  |
|  *Action* |  *Comments* |
| **Approval for Impact Analysis** | **[ ]** |  |
| **Reject** | **[ ]** |  |
| **Defer Until** | **[ ]** |  |
| **Express Approval**  | **[ ]** |  |

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| **3. Initial Impact Analysis** |

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| **Baselines Affected:** |
| **Configuration Items Affected****(e.g product specifications):** |
| **Cost / Schedule Impact Analysis Required? *(check one)*** | **Yes [ ]** | **No [ ]** |
| **Impact on Cost:**  |  |
| **Impact on Schedule:**  |  |
| **Impact on Resources:** |  |
| **Risk associated with implementing the change:** |  |
| **Risk associated with not implementing the change:** |  |
| **Final Review Results:** |  |
| **Review Date:** |  |
| **Priority: *(check one)*** | **High [ ]** | **Medium [ ]** | **Low [ ]** |

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| **4. Impact Analysis Results**  |

**Specific Requirements Definition:**

|  |  |  |
| --- | --- | --- |
| **Additional Resource Requirements** (insert rows as needed)**:** | ***Work Days*** | ***Cost***  |
|  |  |  |
|  |  |  |
| **UAT & Migration Assistance** |  |  |
| ***Totals*** |  |  |

|  |  |
| --- | --- |
| **Impact of Not Implementing the Change:** |  |
| **Alternatives to the Proposed Change:**  |  |
|

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| --- |
| **5. Final Recommendation** |

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 **Project C**

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| **6. Project Change Request Form / Signatures** |

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| **Project Name:** |  |
| **Project Manager:** |  |

*I have reviewed the information contained in this* Project Change Request Form *and agree:*

|  |  |  |  |
| --- | --- | --- | --- |
| ***Name*** | ***Title*** | ***Signature*** | ***Date******(MM/DD/YYYY)*** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*The signatures above indicate an understanding of the purpose and content of this document by those signing it. By signing this document, they agree to this as the formal* Project Change Request Form*.*

**Appendix A**

**Proposed Schedule**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Day*** | ***05-16/04*** | ***19-22/04*** | ***26-28/04*** | ***29/04*** |
| Development |  |  |  |  |
| UAT |  |  |  |  |
| Pre Migration |  |  |  |  |
| Migration |  |  |  |  |

**Appendix B**

**Proposed Solution**