Information Technology Project Request Form

To initiate a request for an IT project, the person with the most knowledge about the proposed project should complete this request. The completed form may be submitted electronically to "MCIEAST G6 Operations" (as displayed in the Global Address List). Please indicate department head approval and support from any other affected departments in your email submission.

MCIEAST G-6 will confirm receipt of the request form by contacting the requestor via email. G-6 Operations staff will review the project request and contact the requestor within 10 working days to schedule follow-up action (please note that it can take additional time pending A/CS approval).

Please direct questions concerning the completion of this form to the G-6 IT Officer at (910) 451- 6051.

1. Project Name: Proposed name of the project.
2. Requested By: The name, title, e-mail address and phone number of the person submitting the request.
3. Project Description: Describe the purpose of the project, what business problem or issue it will address, and what it is expected to achieve.
4. Project Justification: How does this request align with the business strategy/goals and what will the impact be if not accomplished?
5. Requested Delivery Date: What is the project's requested delivery date?

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6. Funds Available: What are the estimated type and amount of funds available for the project?

7. Deliverables: What are the products that should result from this project?

8. Benefits: What are the potential benefits to your organization that will result from doing this project?

9. Assumptions: What circumstances or events may affect project performance (e.g. resource availability)?

10. Constraints: What factors may limit project performance (e.g. resources, time, funding)?

11. Project Sponsor: Name, title, e-mail, phone number and signature of the Department Head who supports the development of the solution.