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| --- | --- | --- |
| **Project Name:** | **LITS Service Owner:** | **Date Submitted:** |
|  |  |  |
| **Customer/s Affected:** | **Requestor:** | **Prepared by:** |
|  |  |  |

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| **INTRODUCTION** |
| *Projects that are less than 80 hours of staff effort and less than $20,000 as well as operational efforts that are managed within a single LITS department use this form to gain approval and prioritization from governance committees and/or LITS leadership. These projects are not managed by the LITS PMO, but by departmental managers and/or tech leads.* |

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| **OVERVIEW** | |
| **DESCRIPTION**  **(what you want to do)** | *Describe what this effort will accomplish; highlight the overall business goal or purpose.* |
|  | |
| **JUSTIFICATION**  **(why you want to do it)** | *State the problem, issue, or opportunity to be resolved or created by this effort* |
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| **PERFORMANCE MEASURES** | *Describe performance measures to gauge what will constitute project success in key process or service areas.* |
| **Key Process/Service** | **Performance Measures** |
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| **GOALS & OBJECTIVES** | *Describe the business outcomes and what this effort will achieve, highlighting how they support business needs.* |
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| **DELIVERABLES** | *At a high level, describe the product/s, process/es, or service/s this effort will produce* |
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| **DURATION** | | *Estimate (plus/minus 50%) the duration of the proposal.* | | | | | |
|  | | | | | | | |
| **RESOURCE REQUIREMENTS** | | | | | *Estimate (plus/minus 50%) the level of effort.* | | |
| **Roles for Project Time & Maintenance** | | | | | **LITS Hours** | **Non-LITS Hours** | **LITS Hours**  Ongoing maintenance and support demand estimate at \_\_\_hours per year.  **Non-LITS Hours**  Ongoing maintenance and support demand estimate at \_\_\_hours per year. |
| Project Coordinator | | | | | 0 | 0 |
| Business Analyst | | | | | 0 | 0 |
| Database Administrators | | | | | 0 | 0 |
| Developer / Testing | | | | | 0 | 0 |
| Network Infrastructure | | | | | 0 | 0 |
| System Administration | | | | | 0 | 0 |
| Customer / Non-LITS Resources | | | | | 0 | 0 |
| **Total Hours =** | | | | | **0** | **0** |
| **COST** | *Estimate (plus/minus 50%)* | | | | | | |
| **Item** | | | | **One-time** | | | **On-going / Annual** |
| Hardware | | | | $0,000 | | | $0,000 |
| Software | | | | $0,000 | | | $0,000 |
| Training | | | | $0,000 | | | $0,000 |
| Consultant Services | | | | $0,000 | | | $0,000 |
| **Total Costs =** | | | | **$ 0** | | | **$ 0** |
| **EXPECTED FUNDING** | | | *If funding has been set aside for this effort, please indicate the source(s).* | | | | |
|  | | | | | | | |

***The following individuals provided input and/or a review of this Business Case:***

***By signing the Business Case you are in agreement with the preliminary estimates for duration, scope, anticipated costs, and the project analysis as described herein.  All signatories to this agreement acknowledge that actual costs and duration will be different from the preliminary estimate.***

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| **NAME** | **SIGNATURE** | **DATE** |
| [Primary Service Owner] |  |  |
| [Customer] |  |  |