Change Request Form



			SOUTHAMPTON CITY COUNCIL	
SECTION 1 - To be completed by the or	riginator of the change and			
Project:		Project:		
Change	e request number (PMO to C	Complete):		
Change				
	Name of c			
Date:				
Description of change/s:				
Reason for change:				
		MoSCoW prioritisation justificat	ion:	
MoSCoW Priority:	Must/Should/Could/Wor	n't have		
	l .			
Confirmation of acceptance of change submitted to and received from:-				
Name / Organisation	Date	Feedback (Approved ?/commen		
,			Y	
SECTION 2 - To be completed by Project	rt Manager			
Description of impact:				
Description of impact.				
SECTION 3 - To be completed by Project Manager				
section 5-10 to complete by Project manager Time implications:				
Ime implications:				
Cost implications:				
LOS IMPIRATURIS.				
Quality implications:				
SECTION 4 - Organisational Lead Comment				
SECTION 5 a - Project Manager Approv	al /if above teleraness al	loace complete section E h		
Section 3 a - Project Manager Approv	ar (ir above tolerances, pil	lease complete section 5 b)		
	Approved	Y/N		
	Rejected	Y/N		
	Funding source for Change			
		Other, state		
	Conditional Approval			
		1		
	Dated:	<u> </u>		
SECTION 5 b - Sponsor Approval				
	Approved	Y/N		
Rejected Y/N		Y/N		
Funding source for Change Project Co Other, sta		Project Contingency Y/N Other state	ontingency Y/N	
	Conditional Approval	otier, state		
	Dated:	1		
SECTION 6 - To be completed by Progra	amme Office			
Entered on to Change Control log				
			1	
Relevant information detailed in project/programme decision log				
Further approval required?		required?		