

<Project Name> - Change Control Form

Date raised:	Date the form is submitted
Raised by:	Name of person who raised the change
Managed by:	Name of person managing the change
Authorising person(s):	Name of group or person authorised to grant or deny the change request e.g. Project Manager, Project Sponsor, PSC
Issue and Change Log #:	Number assigned in the Issues and Change Log

Background and description of the change

Title	Title of the change
Description of the situation	Describe the situation i.e. the problem or opportunity that has lead to this change request.
Description of the proposed solution	Describe the change that you would like to make
Business Case Impact	Describe the impact on the Business Case
Project Impact	Consider: The impact on the PID, work packages, and activity plans Whether the impact would cause deviation beyond the work package
Product Impact	Consider what would have to change – including any changes to linked products
Financial Impact	Consider what cost the change would involve
Resource Impact	Consider what effort the change would need
Risk Impact	Consider what the impact on risks would be
Priority	<input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low
	Describe why you have prioritised in this way

Associated Documents

The following documents should be read in conjunction with this form:

- Some examples are: User requirements; product specification; options paper

Consultation

The following people were consulted and have signed off on this change request:

Area or Unit	Role	Name	Signature(s)

Decision

Decision made:	Describe the decision made
Decision Date:	Date of the decision
Authorised by:	Name(s) and signature(s) of decision makers