



Project Change Request Form

Date: _____

REQUESTOR INFORMATION

Name of Requestor:

Requestor Email:

Department of Requestor:

Manager of Requestor:

Manager Email:

PROJECT INFORMATION

Project Title / Number:

Project Manager (PM):

Building Name:

Location / Floor:

TYPE OF CHANGE:

DESCRIPTION

Subject of Requested Change:

Provide brief description of requested change:

Provide all justifications for requested change:

Please note the benefits of making this change and detriments of not making this change.

Provide as much detail as needed to describe the requested change:

Please note that requests with insufficient information will be denied. Please attach any relevant documents as needed.

Required Signatures:

Submitter Name: _____ Signature: _____

Department Director or Manager Name: _____ Signature: _____
(Must be separate from Submitter)

*Executive Sponsor Name: _____ Signature: _____
(When applicable)

Project Change Requests for projects requiring **Executive Committee sponsorship must include the sponsor's signature. Requests missing required signatures will be returned for completion and will not be reviewed until all are received.*

Below to be completed by Project Manager

Next Steps

PCR # Assigned: _____

Assigned Reviewer: _____

Assignment Date: _____