Section I: Requester Section
To be filled out by the originator of change

1. What do you want to change or document? ____________________________________________________________

____________________________________________________________________________________________________________________________________________________

2. Originator of change (Name): _______________________________________________________________________

3. Today's date: ___________________________________________________________________________________

4. Reasons for Change Request: (Check all reasons for change that apply)

☒ Cycle Time Reduction
☒ Cost Savings
☒ Improved Quality
☒ Other (explain) ____________________________________________

☒ Simplify
☒ Lowers Risk
☒ Obsolete
☐ Improvement
☐ Value Add
☐ Standardize / Document

5. Recommend change / action required: _________________________________________________________________

____________________________________________________________________________________________________________________________________________________

6. State reason why change is recommended. (strengths, opportunities, benefits, features, consequences, pros, cons, cost & schedule impact):

____________________________________________________________________________________________________________________________________________________

7. State risks of not making this change. (weaknesses, threats, consequences, cost & schedule impact):

____________________________________________________________________________________________________________________________________________________

6. Urgency? Is there a due date? ____________________________________________________________________

7. Attachments and References: _____________________________________________________________________

____________________________________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________________________________
Section II:  Project Change Request Assessment

To be filled out by QA Group member
(for now, give it to Joe Hoess and he will designate a person)

1. QA Group Representative: (Name) ____________________________ 2. Date submitted: __________
3. Related change requests: ________________________________________________________________


5. Change request ID number: ________________________________________________________________________________________________

8. Investigation start date: ______________ 9. Investigation due date: ______________
10. Investigation finish date: ______________ 11. Investigation actual hours: ______________

Process Attributes  Fill out any of these questions not already published:

1. **Purpose**: Define- Why is it to be done?

2. **Mission Statement**: A mission statement can be constructed with the following guidelines:
   - 25 words or less.
   - No more than 2 sentences.
   - Carefully thought out.
   - States what you want to accomplish or the reason for existence.
   - Outlines future direction and guides in what to do and to become.
   - Example: "We want to put a man on the Moon in seven years."
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**3. Stage:** Choose from below

- 1. Suspect
- 2. Qualify
- 3. Proposal
- 4. Refine
- 5. Commitment
- 6. Preconstruction
- 7. Construction
- 8. Punch Out
- 9. Warranty
- 10. Post Warranty
- 11. Dead Jobs
- 20. Non-Job Activity (Admin.)

**4. Trigger:** Inputs/Suppliers

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**5. Gate:** Outputs/Internal Customers

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**6. Steward:** The functional manager

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**7. Scope:** Define- What is to be done?

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**8. Goal:** What is the final goal? (Specific, Measurable, Action Oriented, Results based, Time Bound)

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**9. Opportunities / Benefits of doing the process:**

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10. Threats / Consequences of not doing the process:

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

11. External Customer Expectations: (Priorities) – Goal (from our customer’s perspective):

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Impact Analysis

1. Scope / Deliverables Impact: ________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

2. Schedule Impact: _________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

3. Financial Effort Impact: ___________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

4. Quality Impact: _________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
Document and Process Change Request Form

5. Work Effort Impact: ____________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

6. Communications Impacts: _____________________________________________________
____________________________________________________________________________
____________________________________________________________________________

7. Risk Level Impacts: __________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

8. External Impacts: ____________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

9. Other Impacts: ______________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Additional Comments: __________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Section III: Approval Signatures

The change contained within this document is: (check)
1. ☐ Approved, ☐ Rejected, ☐ Deferred                   2. ☐ Approved, ☐ Rejected, ☐ Deferred
Signature: _______________________________ Signature: _______________________________
          QA Group Member                                  Functional Manager
Date: ___________________________ Date: ___________________________