



Modification/Change Control Request (MR) #
Project Name
Version

Your Company Name

Modification / Change Control Request

Date

www.SDLCforms.com



Revision History

Date	Version	Author	Change

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Requested By		Date	
Department		Phone #	

1 REASON FOR THE CHANGE

Provide the reason why the modification request is needed.

2 DESCRIPTION

Provide complete details of the modification request.

3 ASSUMPTIONS

Provide any assumptions here.



4 PROJECT IMPACTS

Complete the following tables. Leave sections blank for areas that do not apply. Fill in cumulative information if hours or costs are impacted.

Estimated Schedule Impacts		
Milestone / Deliverable	Original Target Date	Revised Target Date

Breakdown of Estimated MR Hours and/or Costs			
Item Description (Deliverable, Phase, Activity, Equipment, etc.)	Estimated Hours	\$ / Hour (or N.A)	Estimated Item Cost
TOTALS FOR THIS MR (Sum of above columns)			
Cumulative Project Information	Hours		Cost
Original Project Hours & Cost Estimates			
Total of Previously Approved Modification Requests			
Current MR Estimates (from TOTALS Above)			
NEW CUMULATIVE TOTALS (Sum of above 3 numbers)			



Complete the following table as a guide to explain the estimated additional capitalized and expensed costs associated with this modification request.

CAPITAL / EXPENSE WORKSHEET			
Project Work Order #			
	Estimate	Estimate	
Internal IT Resources	Staff Cost	Capital	Expense
Subtotal	\$0	\$0	\$0
External Professional Services	Professional Services Cost	Capital	Expense
Subtotal	\$0	\$0	\$0
Hardware / Communications & Maintenance	Cost	Capital	Expense
Subtotal	\$0	\$0	\$0
Software Licenses & Maintenance	Cost	Capital	Expense
Subtotal	\$0	\$0	\$0
Other (Travel, Supplies, etc)	Cost	Capital	Expense
Subtotal	\$0	\$0	\$0
Software Licenses	Cost	Capital	Expense
Subtotal	\$0	\$0	\$0
	Cost	Capital	Expense
SUBTOTALS	\$0	\$0	\$0
Contingency	Cost	Capital	Expense
Contingency (15%)	\$0	\$0	\$0



CAPITAL / EXPENSE WORKSHEET			
Project Work Order #			
	Estimate	Estimate	
	Cost	Capital	Expense
GRAND TOTALS	\$0	\$0	\$0
Notes:			

5 APPROVALS

Provide approval information in the following table.

Name / Title	Signature	Date	Comments