



During the Project Closure / Maintenance phase of a project, the Project Management Office (PMO) conducts a survey to gather feedback on the project to improve performance on subsequent projects. This survey will assist the PMO in gathering project sponsors and team member's thoughts and perspectives on the project, and will be integrated with other stakeholder's input into the companion Post Project Review by the PMO.

Your replies to this survey will be kept strictly confidential.

*Note: In any table, select and delete any blue line text; then click Home → Styles and select "Table Text" to restore the cells to the default value.*

**Post Project Review Survey Questionnaire**

**Section 1: General Project Issues**

| Question   | Strongly Agree           | Agree                    | Neither Agree or Disagree | Disagree                 | Strongly Disagree        | Not Applicable           |
|--|--------------------------|--------------------------|---------------------------|--------------------------|--------------------------|--------------------------|
| <i>How clearly defined were the objectives for the project?</i>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>How clearly defined were your objectives for your work tasks?</i>             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>How clear were you as to your role in the project?</i>                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>How adequately involved did you feel you were in the project?</i>             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>How well do you believe that executive management supported this project?</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Do you feel appreciated, recognized and rewarded for your efforts?</i>        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



## Section 2: Project Communications

| Question  | Strongly Agree           | Agree                    | Neither Agree or Disagree | Disagree                 | Strongly Disagree        | Not Applicable           |
|---|--------------------------|--------------------------|---------------------------|--------------------------|--------------------------|--------------------------|
| <i>How efficient and effective were project team meetings?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>How efficient and effective were any technical meetings?</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>The executive sponsor provided needed guidance and support for the project?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>The project manager provided needed guidance and support for the project?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>The project team had a good understanding of my contributions to this project?</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>My individual responsibilities and deliverables were achievable?</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>The roles and responsibilities of the team members were clear?</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>The team member's deliverables were delivered accurately and on time?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Project related meetings made good use of my time?</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Project issues were managed professionally?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Project issues were resolved effectively by the right people and in a timely manner?</i>                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>I was empowered to participate in discussions regarding issues that impacted my work?</i>                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>The status of project problems, risks, delays and cost increases were communicated appropriately and in a timely manner?</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



### Section 3: Scheduling and Estimating

| Question   | Strongly Agree           | Agree                    | Neither Agree or Disagree | Disagree                 | Strongly Disagree        | Not Applicable           |
|--|--------------------------|--------------------------|---------------------------|--------------------------|--------------------------|--------------------------|
| <i>To what degree do you feel the entire team was committed to the project schedule?</i>         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Did you feel that adequate time was allocated to conduct all phases of the project?</i>       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Decisions about schedule changes were discussed by all the people impacted by the change?</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Which of the following estimating issues did you personally have and what was the impact?**

| Question  | Your Response   |
|---|---|
| I was diverted to work on another project full-time or part time.                           | <i>Identify the project name, for how long were you diverted, and what was the impact on your work on the project?</i>  |
| I over / under estimated the amount of time I would have each week to work on this project. | <i>Identify the other work that interfered, the amount of time per week the other work took up, and the impact this other work had on calendar slippage on this project in days, weeks or months.</i>   |
| My estimate for particular tasks was not accurate.  | <i>Describe the type of tasks, how "off" was the estimate in days / weeks, what would help to develop better estimates in the future.</i>   |
| I unexpectedly had to do some re-work.  | <i>Describe why there was work to redo. Was there something in the system design or functional specifications that changed to force you to redesign? What could have helped to prevent the problem?</i> |
|   |   |
|   |   |



### Section 4: Design and Implementation

| Question  | Strongly Agree           | Agree                    | Neither Agree or Disagree | Disagree                 | Strongly Disagree        | Not Applicable           |
|---|--------------------------|--------------------------|---------------------------|--------------------------|--------------------------|--------------------------|
| <i>How effective was the architecture/system design process?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>How effective were the functional specifications?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>How effective were the design specifications?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>How effective were design reviews?</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>How well were design and other project-related decisions documented?</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>How effective has interaction/cooperation between technical teams been?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Were the appropriate people were involved in defining the project plan?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Were the appropriate people were involved in defining the project's functional specifications?</i>                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Were project problems were tracked and communicated effectively?</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Were the appropriate people were involved when needed to review draft deliverables?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Considering time constraints, the right tradeoffs were made between features, quality, resources and schedule impact on the project?</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



### Section 5: Test Processes

| Question   | Strongly Agree           | Agree                    | Neither Agree or Disagree | Disagree                 | Strongly Disagree        | Not Applicable           |
|--|--------------------------|--------------------------|---------------------------|--------------------------|--------------------------|--------------------------|
| <i>How useful was your unit testing?</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>How useful was the user acceptance testing?</i>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Were the "bugs" found during user acceptance testing properly communicated back to the design people?</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Did the user acceptance testing consume too much of your time?</i>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>To what degree did you have adequate tools you needed for testing?</i>                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Were the results from these testing tools and testing software helpful?</i>                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Section 6: Training and Documentation

| Question   | Strongly Agree           | Agree                    | Neither Agree or Disagree | Disagree                 | Strongly Disagree        | Not Applicable           |
|--|--------------------------|--------------------------|---------------------------|--------------------------|--------------------------|--------------------------|
| <i>The project management forms and templates were effective.</i>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>The project management forms and templates are about right in scope and size.</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Was any training that was given completely effective?</i>                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Would you recommend substantially more training on future projects?</i>           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Does the training program need process improvement?</i>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



## Section 7: General Process Questions

| Question  | Your Response |
|---|---------------|
| <i>What communication, organization, and/or structural problems were encountered? How could we have done better in these areas?</i>                                     |               |
| <i>To what degree have you observed any personal conflicts that interfered with the progress on the project?</i>  |               |
| <i>Which project elements were helpful and should be repeated on future projects?</i>   |               |
| <i>Is there anyway in which you think that the development process hampered this project? If so, how?</i>   |               |
| <i>What were your main frustrations during the project?</i>   |               |
| <i>What was the key factor that you believe impacted the schedule, resources, requirements scope, and/or quality of the installed product? How was the impact felt?</i> |               |
| <i>What did you like best about the project team?</i>   |               |
| <i>What did you like least about the project team?</i>  |               |
|   |               |
|   |               |

## Section 8: Approval

|                  |  |             |  |
|------------------|--|-------------|--|
| <b>Your Name</b> |  | <b>Role</b> |  |
| <b>Signature</b> |  | <b>Date</b> |  |