<Your Company>
Project Change Authorization Form

[Select Date]

|  |  |  |  |
| --- | --- | --- | --- |
| Customer Name | <Client’s Company> | Project Sponsor |  |
| Project Name | <Project Name> | Project Manager |  |
| Project Change Authorization (PCA) |  | Responsible Individuals |  |
| Requested By |  | Contract Number |  |
| Estimated Start Date |  | Project Number |  |
| Estimated End Date |  | PCA Number |  |

This Project Change Authorization (PCA) adds <PCA Title> to the Statement of Work for <project name>. The scope of work is to <add a brief project description>.

# <PCA Activity 1> Description

|  |  |
| --- | --- |
|  | [Briefly describe the purpose of this activity.]Note: To delete any tip (such as this) just click it and start typing. If you’re not yet ready to add your own text, just click a tip and press spacebar to remove it. |

This activity has the following subtasks:

* <Task #1: Brief description of task>
* <Task #2: Brief description of task>
* <Task #3: Brief description of task>

## Completion Criteria

|  |  |
| --- | --- |
|  | [Briefly describe the required criteria that determines if this activity is complete. Note that there is a separate section later in this document where you can describe the overall completion criteria for the PCA.] |

## Deliverables

|  |  |
| --- | --- |
|  | [List or summarize all specific deliverables resulting from this activity.] |

## Assumptions

|  |  |
| --- | --- |
|  | [List any assumptions necessary to ensure that you and the client have the same expectations for this activity.] |

* <Assumption #1: Brief description of assumption>
* <Assumption #2: Brief description of assumption>
* <Assumption #3: Brief description of assumption>

# Estimated Charges for the Change Authorization

<Your Company> will provide an estimated <000> hours of Professional Services for this PCA at hourly rates based on position and roles, as follows:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Pricing Tier | Positions/Roles | Qty. | Estimated Hours | Hourly Rate | Estimated Total Funding Requirement |
| 1 <Description> |  |  |  |  |  |
| 2 <Description> |  |  |  |  |  |
| 3 <Description> |  |  |  |  |  |
| 4 <Description> |  |  |  |  |  |
| 5 <Description> |  |  |  |  |  |
| Total |  |  |  |  |  |

# Estimated Schedule for the Change Authorization

The scope of services described in this PCA is expected to span approximately <00> weeks.

* The start date for this PCA is <date>.
* The estimated end date for this PCA is <date>.
* This PCA will expire on <date> unless extended by both parties.

# Completion Criteria for the Change Authorization

<Your Company> will have fulfilled its obligations under this PCA when one of the following first occurs:

* All deliverables listed in this PCA have been provided.
* The number of hours for services on this PCA, as detailed in the Estimated Charges section of this document—or in any subsequent approved PCA—have been completed.
* An agreed upon end date for this PCA is reached.

Note: Either party may terminate this PCA with the provision of a written <00> week termination notice of the original Statement of Work, dated <date>.

# Terms for this Change Authorization

<Your Company> will provide an estimated <000> hours of Professional Services for this PCA. The estimated total funding requirements for the services is <$00,000> plus travel and living expenses, which are estimated at 15% of services or <$00,000>.

<Client’s Company> will be invoiced monthly based on actual hours expended and travel and living expenses incurred.

All other terms and conditions stated in the original Statement of Work dated <date>, unless modified in this PCA, will remain unchanged.

This Project Change Authorization is subject to the terms and conditions of the <project name> Statement of Work. It is agreed that the complete agreement for these services consists of the original Statement of Work, this PCA (and any other approved PCAs), and the Customer Agreement.

Approved by:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |
| For <Client’s Company> |  |  | Date |  | For <Your Company> |  |  | Date |