

# Project Concept Document



**The Project Concept Document (PCD) provides high-level project information and is a requisite for the review of project viability.**

<b>DATE:</b>			
<b>PROJECT NAME:</b>			
<b>DEPARTMENT/AGENCY:</b>			
<b>DIVISION/BUREAU/OFFICE:</b>			
<b>AGENCY PRIORITY:</b>	Urgent <input type="checkbox"/>	High <input type="checkbox"/>	Medium <input type="checkbox"/>

**AGENCY SPONSOR** - The sponsor is the Agency person that has ultimate authority over the project, controls project funding, resolves issues and scope changes, approves major deliverables, and provides high-level direction.

Name	Title	E-Mail Address	Phone Number

**AGENCY LIAISON** – The Agency liaison is the primary point of contact from the Agency who works jointly with the DoIT Liaison, Agency Sponsor, and others as needed throughout the project.

Name	Title	E-Mail Address	Phone Number

**DoIT LIAISON** - The DoIT liaison is the primary point of contact from DoIT who works jointly with the Agency Liaison, Agency Sponsor, and others as needed throughout the project.

Name	Title	E-Mail Address	Phone Number

**PROJECT OVERVIEW** - Provide a high-level introductory overview of the proposed project.

**RISKS/CONSTRAINTS** - Identify and prioritize the risks; an event or condition that, if occurs, will have an effect on meeting objectives, and constraints; a restriction or limitation that will affect meeting project objectives. Some examples include loss of funding, new Federal or State Statute, and/or Critical resource availability.

**\*ALTERNATIVE APPROACHES** – Please give an explanation of alternative approaches considered and the reason they were not selected. If this is a Vendor project, has the Agency considered developing the solution internally using DoIT resources? If so, please state why the Agency has decided to complete a Competitive Bid.

**SCHEDULE**

<b>Expected Start Date</b> (Enter MM/YYYY):	
<b>Expected Deployment or Completion Date</b> (Enter MM/YYYY):	

**FUNDING**

How much funding is available	
-------------------------------	--

If Yes is selected above, specify the following funding source information:

	% Source
General	
Non-General	

Please note that we estimate the cost of DoIT internal resources, salary + benefits = \$55.00/hour. Also note that we assume that state staff have 6 hours/day of available time to dedicate to project work.

**DoIT PARTICIPATION**

DoIT – Bureau of Finance and Administration – Purchasing (Hardware/Software)	<input type="checkbox"/>	DoIT - Operations Division (OPS) – DBA Support	<input type="checkbox"/>
DoIT – Bureau of Finance and Administration – Contracts Unit	<input type="checkbox"/>	DoIT - Operations Division (OPS) – NetOps Support	<input type="checkbox"/>
DoIT - Technical Support Services Division (TSS) – Desktop Support (RSS)	<input type="checkbox"/>	DoIT - Operations Division (OPS) – SysAdmin (Application Server) Support	<input type="checkbox"/>
DoIT - Technical Support Services Division (TSS) – File/Print server; email Support (GSS)	<input type="checkbox"/>	DoIT - Web Services Division (WSD) – Web Application Development	<input type="checkbox"/>
DoIT - Technical Support Services Division (TSS) – Help Desk Support (HDS)	<input type="checkbox"/>	DoIT - Web Services Division (WSD) – Web Content Support	<input type="checkbox"/>
DoIT – Security Group		DoIT - Web Services Division (WSD) – Web Infrastructure Support	<input type="checkbox"/>
DoIT - Agency Software Division (ASD) – Develops and/or Analysts	<input type="checkbox"/>	DoIT - Web Services Division (WSD) – System Automation (e Licensing) Support	<input type="checkbox"/>

**VENDER PARTICIPATION**  
(Check if Yes)

**AGENCY PARTICIPATION**  
(List Names/Roles)

**SIGN – OFFS/APPROVALS**

Title/Role	Name	Signature	Date