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| Project Charter: The pilot project charter outlines the who, what, and why of your project. Complete sections in grey. |
| **Project Title** | **[Title]** |
| Project Lead Name | [name] | Executive Champion | [name] |
| Start Date | XX/XXXX (mo/yr) | Project Approval Date | XX/XXXX |
| Est. Completion Date | XX/XXXX | Latest Revision to Charter | XX/XX/XXXX |
| **PROBLEM /****AIM STATEMENT** |  [Please specify target population or end-user group] |
| **PROJECT SUMMARY** |  |
| Description |  [High level description of solution features.] |
| Social Need Capacity Building Area of Focus | [Select one and delete the rest (refer to program baseline assessment results): (1) Leadership perspective (2)-Establishing screening system (3) Using screening data (4) Linking to resources (5) Closing loop on referrals (6) Strengthening partnerships] |
| Strategic Impact | [How it’s aligned w/ strategic plan goals] |
| Estimated Costs |  |
| **CONSTRAINTS** |  |
| Time (days or months) |  |
| Budget Available |  |
| FTE allocations by role |  |
| Scope |  |
| **RISKS** |  |
| Key Assumptions |   |
| Concerns/Limitations |   |
| **KEY STAKEHOLDERS** |  |
| Client Population(s) |  |
| Staff | [include names or just roles if TBD] |
| Community Stakeholders |  |
| External Partners | [other organizations and specific contacts] |
| **PROJECT TEAM** |   |
| Lead | [name, role;… - project lead listed above] |
| Key Contributors | [name, role,…] |
| Advisors | [name, role,…] |
| Approvers | [name, role… - include executive champion listed above] |
| Supporters | [name, role,…] |
| **TEAM LOGISTICS** | [e.g. Meet Tuesdays, 3-4 pm @ (room number, virtual, etc.)] |
| **PROJECT MILESTONES** | Date | Project Milestone or Deliverable |
|  | [Month, Year] | [add rows as needed] |
|  | [Month, Year] |  |
|  | [Month, Year] |  |
| **SUCCESS METRICS** | Metric Description | Baseline Value | Goal Value |
|  | [add rows as needed] |  |  |
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