

Software Project Scope Template

Organization		
Project Name		
Client		
Version Number		
Client Point Of Contact		

Organization Contact Info		
Name		
Phone		
Email		
Mailing Address		
Date Prepared		Author:
Project Manager		
Begin Date	End Date	Project Duration

Project Team		
Name / Title	Phone	Email

Project	
Introduction <i>Description Without Requirement Details</i>	
Background <i>What Led To The Necessity Of This Project?</i>	
Resource Requirements	

Fee Summary		
Phase One	Hours	Total
Phase Two	Hours	Total
Estimated Data Storage		
Personnel		
Training		
Implementation Costs		
Fee Schedule		

Scope Of Work <i>What Does The Project Entail? What Are The Delivery Methods?</i>

Requirements <i>define the features and system behaviors your software must include.</i>	
Functional Requirements	
Nonfunctional Requirements	

Exclusions (Out of Scope) <i>List any features, modules, or functionality not included in this project.</i>

Project Deliverables <i>List the assets your team will provide at key milestones or project.</i>	
Milestones	
Est Delivery Date	Project Milestone Title
Deliverable Materials <i>What Is The Final Product To Be Supplied To The Client?</i>	
Stakeholders	
Software Teams Affected	
Non-Software Teams Affected	
Steering Committee	
Customers	
Potential/Other	
Operations & Support	
Communications Plan	
Quality Management Plan	
Software Project Training Plan	
Regulatory Compliance	

Timeline | *Project Begin And End Dates, Approximate Delivery Of Major Events*

Definitions | *Define Any Unique Language Used*

Services | *Service Coordination*

Agency Responsibilities

Client Responsibilities

Mutual Responsibilities

Project Risks

Issue / Risk

Mitigation / Contingency

Criteria For Completion | *What Is Required To Occur For A Completed Project?*

Change Control Process | *Describe how changes to scope will be managed once the project begins.*

Business Terms / Conditions
Contract Modifications
Confidentiality
Termination

Comments & Approval
Comments

Authorization	
Client Signature	
Client Printed Name	
Client Date	
Provider Signature	
Provider Printed Name	
Provider Date	

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