*Insert Project Name Here*

Project Close-Out

Version *1.0 April 2, 2024*

VERSION HISTORY

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Version#** | **Implemented****By** | **Revision****Date** | **Approved****By** | **Approval****Date** | **Reason** |
| 1.0 |  |  |  |  | Original Document |

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# General Project Information

|  |
| --- |
|  |
|  |  |
| **Project Name** |  |
| **Project Description** |  |
| **Project Manager** |  |
| **Project Sponsors** |  |
| **Key Stakeholder** |  |
| **Date of Closure** |  |
| **Team Members** |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Goal** | **Actual** | **Variance** |
| **Start Date** | Charter Signed X/XX/XX |  |  |
| **Finish Date** | Go Live X/XX/XX |  |  |
| **Days** |  |  |  |

# Project Scope Retrospective

*Now that the project has been completed, look at the scope as defined in the original project charter and evaluate it.*

Upon reflection, the original project scope was:

|  |  |  |  |
| --- | --- | --- | --- |
| **Too narrow** |[ ]  **Too broad** |[ ]  **Too large** |[ ]  **On Target** |[ ]

*Comments:*

# Management Effectiveness

This section should contain an overall summary of the project from start to finish.,

# Lessons Learned

This section should contain a summary of the project’s pain points and the steps taken to mitigate them.

# Administrative Closure

The following items were deliverables from this project:

Include a summary of the project’s successes, concerns, additions as needed

# Contract Closure

Include a list/description of any contracts that were initiated and closed because of this project. An answer of “There were no contracts involved with this project.” is perfectly acceptable

# Information Distribution & Archive

|  |  |  |
| --- | --- | --- |
| **Item** | **Archive/ Distribution** | **Distribution Medium** |
| EX: Project Charter | Project SharePoint site | SharePoint/Email |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. Appendix A: Project Close-Out Approval

The undersigned acknowledge they have reviewed the **Project Close-Out Form** and agree with the approach it presents. Changes to this **Project Close-Out Form** will be coordinated with and approved by the undersigned or their designated representatives.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: | Click or tap here to enter text. | Date: | X/XX/XX |
| Title: | Click or tap here to enter text. |  |  |
| Role: | Click or tap here to enter text. |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: | Click or tap here to enter text. | Date: | X/XX/XX |
| Title: | Click or tap here to enter text. |  |  |
| Role: | Click or tap here to enter text. |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: | Click or tap here to enter text. | Date: | X/XX/XX |
| Title: | Click or tap here to enter text. |  |  |
| Role: | Click or tap here to enter text. |  |  |