

Community Leadership Development Program

Project Charter

Project Information	tion				
Project Name:		Project Team Lead:			
Project Team		Community			
Members:		Project Sponso	or:		
Background/Purpose of Project:					
In Scope to be delivered:		Out of Scope/W	Out of Scope/Will not be delivered:		
Description of Success:					
[What does success look like? How will it be measured? This should reflect the justification					
used in the busi		III It be measured?	This should reflect the justification		
	-				
Key Partners – teams, departments or groups of people that have a responsibility or will be impacted by the project					
Name	Role	Department	Role on Project		
		-			
Major Deliverables					
Line-Item Description		Expe	ected Timeline		
Constraints:					
[Describe here potential factors that will impact the delivery of the project]					
Assumptions:					

[Describe here conditions or situations that you are relying on, to achieve project goals within assumed constraints]

Risks:

[Describe here the risks that have been identified at this stage in the project]

Approval				
Name:	Signature:	Date:		
[Project Lead]		[month/year]		
[Project Sponsor]				

Due to Terry Dow – <u>tdow@leadershipniagara.ca</u> prior to Dec 31st 2024