**Schedule Baseline Change Request Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **College:** |       | **Project:** |       |
| **CPM:** |       | **Project #:** |       |
| **Requested by**: |       | **Submitted on:**  |       |
| **Phone** |       | **Reply due by:**  |       |
| **Email:**  |       |

**Priority:** [ ]  **Immediate Action** [ ]  **Routine**

|  |  |
| --- | --- |
| **Comments**: |       |

**Baseline Impact**: [ ]  **Scope**  [ ]  **Schedule** [ ]  **COs**

|  |  |
| --- | --- |
| **Comments:** |       |

**Section I: Description of Change**

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|       |

**Section II: Justification: Benefits of and /or Reasons for Change**

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|       |

**Section III: Impact on Schedule and Project Cost**

|  |  |  |  |
| --- | --- | --- | --- |
| **A. Program Summary** | **Current Baseline** | **Proposed Revision to** **Baseline Schedule** | **Variance** |
| Construction /Project Start Date  |       |       |       |
| Substantial Completion Finish Date  |       |       |       |

|  |  |  |  |
| --- | --- | --- | --- |
| **B. Cost Summary** | **Baseline Budget** | **Estimate at Completion**  |  **Baseline Variance** |
| Baseline Schedule Cost Data =  |       |       |       |

**Section IV: Notes /Remarks (if required)**

**Section V: Required Attachments Attached**

1. Proposed Revised Baseline Schedule [ ]  yes [ ]  no
2. Primavera Summary Schedule showing Variance to Prior Balance [ ]  yes [ ]  no
3. Primavera Summary Schedule Baseline Budget & Estimate to Complete [ ]  yes [ ]  no

|  |  |  |
| --- | --- | --- |
| **Submitted By/ Print Name**  | **Signature** | **Date** |
|  |  |  |

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| **PMO Review by**  | **Signature** | **Date** |
| **Name:****Title:**  |  |  |

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| **Approved by :**  | **Signature** | **Date** |
| **LACCD PMO Program Controls****Name:** **Title:**  |  |  |
| **LACCD PMO Director****Name:** **Title:**  |  |  |
| **LACCD Facilities Department** **Name:****Title:**  |  |  |