NIH Clinical Center IT Project Request Form

Please use the form below to submit a new CC IT Project Request. Any new IT project using CC resources requires approval from the CC IT Advisory Group (ITAG). Please submit requests as early as possible to allow time for the CC to assess and prioritize annual IT investments. Typical review time is 1-2 months before resources can be scheduled. Once submitted, follow-up communication will be sent regarding the review and approval process. Please submit the completed form to <u>CCITProjectRequests@mail.nih.gov</u>.

General Project Information	
Project Name	
Requestor Name	Department/IC
Requestor Email	Requestor Role/Title
Date Submitted	Department Head*

* By including the name of the department head (or similar executive leader for non-CC requests), you are indicating that this individual is aware of the submission of this request and approves of it being reviewed by the ITAG.

PROJECT SCOPE Describe the boundaries/scope of the request. Is this related to a current application, if so, which one? What is your expected timeframe for beginning this project? **BUSINESS NEED** Why this is needed, what is the benefit? Is this related to a mandate or requirement of a regulatory agency (if yes, which agency)? Define the strategic alignment to DHHS/NIH, CC, or Department Goals. **FUNDING** What is the estimated implementation cost? What is the estimated annual maintenance cost? Who is funding this project? Are these costs included in a current budget, if so, which one?