

Software Change Request (SCR) Form

SCR #: _____

REQUIREMENT

#: _____

CHANGE REQUEST INITIATION: Originator: _____ Phone#: _____
(____)

Date Submitted: ____/____/____ System Name: _____ Version Number: _____

CONFIGURATION ITEM: Software: _____ Documentation: _____

CHANGE TYPE: New Requirement: _____ Requirement Change: _____ Design Change: _____ Other: _____

REASON: Legal: _____ Business: _____ Performance Tuning: _____ Defect: _____

PRIORITY: Emergency: _____ Urgent: _____ Routine: _____ **Date Required:** ____/____/____

CHANGE DESCRIPTION: (Detail functional and/or technical information. Use attachment if necessary.)

Attachments: Yes / No

TECHNICAL EVALUATION: (To be completed by Contractor. Use attachment if necessary.)

Received By: _____ Date Received: ____/____/____ Assigned To: _____ Date Assigned: ____/____/____

Type of Software Affected: _____

Modules/Screens/Tables/Files Affected: _____

Documentation Affected:	Section #	Page #	Date Completed	Initial
Requirements Specification	_____	_____	____/____/____	_____
System Design Specification	_____	_____	____/____/____	_____
System Test Plan	_____	_____	____/____/____	_____
Training Plan	_____	_____	____/____/____	_____
User System Reference Manual	_____	_____	____/____/____	_____
System Maintenance Manual	_____	_____	____/____/____	_____
Other (Specify)	_____	_____	____/____/____	_____

TIME ESTIMATES: (To be completed by Contractor. Use attachment if necessary.)

Lifecycle Stage	Est. Time	Act. Time	Date Comp.	Remarks
Analysis/Design	_____	_____	____/____/____	_____
Coding/Testing	_____	_____	____/____/____	_____
Acceptance	_____	_____	____/____/____	_____
Total Hours:	_____	_____		_____

Impact Analysis Needed: Yes / No (If yes, include impact on technical performance, resources, schedule, etc.)

APPROVALS: Change Approved: _____ Change Not Approved: _____ Hold (Future Enhancement): _____

1. Signature _____	Date: _____
2. Signature _____	Date: _____
3. Signature _____	Date: _____

See Reverse for Instructions

INSTRUCTIONS FOR COMPLETING AND PROCESSING THE SCR FORM

This form will be used to request changes to DOE information system software and documentation. The form is appropriate for all stages in the lifecycle, and may be initiated by DOE or Contractor personnel. All change requests will be evaluated and will require approvals. A Software Change Request (SCR) should contain only one change item. A separate SCR should be completed for each requested change. The form is a tool for initiating, evaluating, and tracking project change control requests. It may be modified or tailored to accommodate specific client/project requirements. The Software Change Control Log provides a suggested format for recording and maintaining software change request data.

(Initiators Complete the Shaded Areas; Contractors Complete the TECHNICAL EVALUATION and TIME ESTIMATES Sections)

FIELD	DEFINITION
SCR #:	A sequential number beginning with the organizational code (e.g., HR0000194). For requests initiated by the Contractor, a sequential number beginning with the alpha character C (e.g., C0000194). The numbers will be assigned and controlled by configuration management personnel or designees, and tracked by project. Initiators will be notified as to the specific SCR numbers assigned.
REQUIREMENT #:	Number of the requirement to be changed (if known). Note: If the requested change is a <i>new requirement</i> , a specific requirement number may not be assigned or available at the time of the request.
CHANGE REQUEST INITIATION:	Information about the initiator of the change request, and the software/documentation impacts. Originator: Name of person initiating the SCR. Phone #: Phone number of originator. Date Submitted: Date form submitted to DOE or Contractor. System Name: Name of system. List full name of system and acronym. Version Number: Version number of software/documentation to be changed (e.g., V1.0, V2.0, V2.1).
CONFIGURATION ITEM:	Configuration item affected. Place a "X" in the appropriate area. Software: System component (e.g., operating systems/communications/applications software). Documentation: System component (e.g., requirements specification/training plan).
CHANGE TYPE:	Type of change being requested. Place a "X" in the appropriate area. Specify other. New Requirement: Requirement was not identified in original specifications. Requirement Change: Requirement needs to be altered. Design Change: Original design needs to be changed. Other: Indicates other than above change types. Specify in the CHANGE DESCRIPTION area.
REASON:	Place a "X" in the appropriate area. Prepare a brief justification identifying the basis for initiating the SCR and the expected benefits. Use the CHANGE DESCRIPTION area of the form if sufficient space is available; otherwise, use an attachment. Assist the appropriate personnel in ranking priorities. Legal: Mandate by changes in Federal and/or State regulations and laws. Business: Mandated change related to DOE business and policy changes. Performance Tuning: Change(s) required to improve application usability (e.g., improved screen layout, conversions), or platform/operating software performance. Defect: A problem with a system/application that requires a change (e.g., programabend, program error).
PRIORITY:	Ranking to identify action or response to an SCR. Place a "X" in the appropriate area. Emergency: A change in operational characteristics that, if not accomplished without delay, will impact system operability. Urgent: A change that, if not accomplished promptly (e.g., prior to the next production cycle), will impact system effectiveness. Routine: A change that can be planned, scheduled, and prioritized. Date Required: The date the change is needed.
CHANGE DESCRIPTION:	Detailed functional and/or technical information about the change. Use an attachment, if necessary, to provide adequate detail or supporting documentation (e.g., statement of new requirement). Attachments: If attachments are included, circle "Yes," if not, circle "No."
TECHNICAL EVALUATION:	To be completed by Contractor. Provides tracking data of technical approach. Received By: Name of person (Contractor) who initially received or originated the SCR. Date Received: Date SCR received by Contractor. Assigned To: Person who is being assigned the responsibility for the technical evaluation. Date Assigned: Date assigned to assignee. Type of Software Affected: Identify type(s) of software affected by the change (e.g., operating system software, application software). Also identify all dependent or subordinate interfacing applications that may be affected by the change. Include name(s) and version number(s) if applicable. If necessary, use the CHANGE DESCRIPTION area or an attachment for additional information. Modules/Screens/Tables/Files Affected: Identify modules/screens/tables/files affected by the change. Include name(s) and version number(s) if applicable. If necessary, use the CHANGE DESCRIPTION area or an attachment for additional information. Documentation Affected: Identify documentation affected by the change. Include section and page number(s). Enter the date completed and the initials of the author. If necessary, use the CHANGE DESCRIPTION area or an attachment for additional information.
TIME ESTIMATES:	To be completed by Contractor. Identify the lifecycle stage(s) affected by the change. Post the estimated and actual time required, and date(s) completed. Total the estimated times and provide any remarks. Impact Analysis Needed: If a impact analysis is needed, circle "Yes" and attach to the SCR form; otherwise, circle "No." An impact analysis of the change request should have details on impacts to the Project Plan (i.e., available technical staff, schedule, costs, etc.).
APPROVALS:	Acquire the approval signatures for authorizing the SCR (e.g., Client - Project Management Officer (PMO), Point of Contact (POC), Contractor - Project Manager (PM)). Select one option by placing a "X" in the appropriate action area: Change Approved, Change Not Approved, or Hold (Future Enhancement). Note: Individuals authorized to approve change requests are identified in the project Configuration Management Plan.