

Expedited Life Cycle (XLC) Process Change Request (CR)

Please complete this form and submit it to the [CMS IT Governance Resource Mailbox](#)

CR NUMBER: CR 14-012 **DATE SUBMITTED:** 07/10/2014

CR TITLE: General Improvements to XLC Templates

PRIORITY {As determined by submitter}

- HIGH: Emergency/Critical to Mission
 MEDIUM: Urgent/Needed but Not Critical to Mission
 LOW: Routine to Mission

SUBMITTER INFORMATION

NAME: Celia Shaunessy **ORGANIZATION:** CMS/OIS/EASG/DITG

PHONE: 410-786-7560 **EMAIL:** celia.shaunessy@cms.hhs.gov

CHANGE ITEM {Identify item/template/deliverable}:

ALL XLC templates

DESCRIPTION OF CHANGE {include supporting documentation as appropriate}:

Make the following changes to all XLC templates that are currently in Microsoft Word format:

- **Cover page:** Add “*For questions about using this template, please contact [CMS IT Governance](#). To request changes to the template, please submit an [XLC Process Change Request \(CR\)](#).*”
- **Cover page:** Use version “X.X” rather than the template revision number.
- **Cover page:** Correct typo (change the words “contact number” to “contract number”).
- **Cover page:** Add text “Approved by XLC Steering Committee on [DATE].”
- **Add Template Revision History page:** The Template Revision History page was inadvertently omitted from most of the XLC templates. See example on page 2 of this CR form.
- **Table Captions:** For 508 compliance purposes, move captions from bottom of all tables to the top of all tables.
- **Approvals Page:** Make the Approvals page more generic to allow for more flexibility for the project manager in determining who needs to approve the document. See example on page 3 of this CR form.

IF CHANGE IS TO A TEMPLATE, PLEASE TURN TRACK CHANGES "ON" AND MAKE YOUR PROPOSED UPDATES. SUBMIT THE UPDATED TEMPLATE ALONG WITH THIS CR FORM.

JUSTIFICATION FOR CHANGE:

General improvements and improved consistency among XLC templates.

XLC STEERING COMMITTEE FINAL DISPOSITION

DECISION

- APPROVE
- DISAPPROVE
- DEFER
- APPROVE WITH MODIFICATIONS

DECISION DATE: 8/1/2014 **NOTES/COMMENTS:** None

DIVISION OF IT GOVERNANCE IMPACT ASSESSMENT

XLC Template Revision History

The following table contains information regarding changes made to the XLC template over time. This is for informational purposes only. To provide information about changes made to the project-specific [NAME OF DOCUMENT] artifact, please refer to page [XXX] (Record of Changes).

Table 1: XLC Template Revision History

Version Number	Date	Author/Owner	Description of Change
1.0	XX/XX/XXXX		Baseline version

Appendix A: Approvals

The undersigned acknowledge that they have reviewed the [Project Name] [Document Name] and agree with the information presented within this document. Changes to this [Document Name] will be coordinated with, and approved by, the undersigned, or their designated representatives.

Instructions: List the individuals whose signatures are desired. Examples of such individuals are Business Owner, Project Manager (if identified), and any appropriate stakeholders. Add additional lines for signatures as necessary.

Signature: _____ Date: _____
Print Name: _____
Title: _____
Role: _____

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Print Name: _____
Title: _____
Role: _____

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Print Name: _____
Title: _____
Role: _____