**BUSINESS CASE FOR IT CONSULTING RESOURCES**

# PROJECT IDENTIFICATION

|  |  |
| --- | --- |
| **Agency/Division/Program Area** | Click here to begin typing |
| **Project Manager** | Click here to begin typing |
| **Project Number and Name** | Click here to begin typing |

# CURRENT SITUATION AND BUSINESS NEED FOR IT CONSULTING RESOURCES

Click here to begin typing

# Proposed Solution

Click here to begin typing

# Project Goals and Objectives

Click here to begin typing

# Impact if No Action Taken

Click here to begin typing

# Funding

Click here to begin typing

# Project Cost / Resource Estimate Summary

**Current Request**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Contractor Type** | **Number Needed** | **Hourly Rate** | **Number of Hours Anticipated**  | **Total Cost** |
|  |  |  |  |  |
|  |  |  |  |  |
| **Total Request** | **$** |

|  |  |
| --- | --- |
| **The current request is for XX years and is not to exceed $** |  |

**Total Project Life Cycle Cost** (If applicable)

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Description** | **Amount** | **Cumulative Total Cost** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Current Request |  |  |  |
| With approval of this request, the **Total Life Cycle Cost will be $** |  |

**COST BENEFIT ANALYSIS / RETURN ON INVESTMENT**

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**ALTENATIVE SOLUTION ESTIMATE - FULL TIME STATE EMPLOYEE POSITION(S)**

|  |  |  |  |
| --- | --- | --- | --- |
| **State Employee Position****(Indicate if Position is available)** | **Total Full Time Positions** | **Expected Yearly Salary** **(Based on Position including 32% Fringe)** | **Total Cost** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Note: This must be included. |  | **Total Amount** | **$** |

# Alternatives to the Proposed Solution

|  |  |
| --- | --- |
| **Other Options Considered**  | **Reasons for Rejecting Alternative Solution** |
| Option 1 – Click here to begin typing |  |
| Option 2 – If applicable |  |

# Additional Comments

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