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**Project Management Guide (PMG)**

**Chapter Name:** McHenry Area Jaycees **State Name:** Illinois

**Project Name:** Click here to enter text.

**Area of Opportunity:** Choose an item.

**Category:** Choose an item.

**Project Manager’s Officer****:** Click here to enter text. **Primary Phone:** Click here to enter text.

**Email Address:** Click here to enter text.

**Supervising Chapter Officer:** **Primary Phone:** Click here to enter text.

**Email Address:** Click here to enter text.

**PURPOSE OF THE GUIDE:**

Good advanced planning and record-keeping will assure success. Use this guide in planning and conducting the project by answering each of the following questions and updating information as the project progresses. Evaluate the impact of your project and provide recommendations for future Project Managers.

**PLANNING**

1. **Primary Purpose***:*
2. **Project Overview**
	1. **Give a brief description of the proposed project and background information.** *(Who, what, when, where and why?)*
	2. **How will this project benefit the individual member, the chapter, and the community?**

Individual Member will benefit

The chapter will benefit

The community is benefitted

**List specific and measurable goals to be accomplished by this project.** *(Example: Involve 25 Jaycees. Recruit 2 new members.)*

* + 1. **Goal 1 –**
		2. **Goal 2 –**
		3. **Goal 3 –**
1. **Steps to implementation:** *List the specific steps to bring this project to a successful completion, showing the planned dates for each step, and the person or people responsible for each step.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| TASK/ACTIVITY | START DATE | FINISH DATE | % COMPLETE | PERSON(S) RESPONSIBLE | CRITICAL TASK (Y/N) | FOR CRITICAL TASKS: |
| POTENTIAL PROBLEM | POTENTIAL SOLUTION |
| Write PMG |  |  | 100% | PM | Y |  |  |
|  |  |  | 0% |  | Y |  |  |
|  |  |  | 100% |  | Y |  |  |
|  |  |  | 100% |  | Y |  |  |
|  |  |  | 100% |  | Y |  |  |
|  |  |  | 100% |  | Y |  |  |
|  |  |  | 100% |  | Y |  |  |

1. **Critical Contacts**

Project Manager

Name:

Email:

Phone 1:

Phone 2:

Duties:

Committee Member –

Name:

E-mail:

Phone 1:

Phone 2:

Duties:

Committee Member –

Name:

Email:

Phone 1:

Phone 2:

Duties:

Committee Member –

Name:

Email:

Phone 1:

Phone 2:

Duties:

Committee Member –

Name:

Email:

Phone 1:

Phone 2:

Duties:

1. **What specific materials, supplies, and resources will be required?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Material or Supply & Quantity | Person Responsible for Obtaining | Date Needed | Donated, Owned or Purchased? | Cost/Value |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. **Complete a proposed budget indicating all anticipated income and expenses**

Proposed Budget

**INCOME: PROPOSED**

**Appropriation from chapter** $0

**Value of donated items (list)**

**Other sources of income (list)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TOTAL INCOME $**

**EXPENSES: PROPOSED**

**Value of donated items (list)**

**Other expenses (list)**

**Return of appropriation from chapter** $0

**Return to chapter (profit)** $0

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TOTAL EXPENSES $**

1. **Describe the potential problems and solutions to successfully complete this project.**

**Potential Problem:**

**Potential Solution:**

**Potential Problem:**

**Potential Solution:**

**Potential Problem:**

**Potential Solution:**

**Potential Problem:**

**Potential Solution:**

**EVALUATION**

1. **List solutions and/or recommendations for future Project Managers.**
2. **Results**

**Primary Purpose:**

**Results:**

**Goal 1:**

**Result:**

**Goal 2:**

**Result:**

**Goal 3:**

**Result:**

**Project Summary :**

**Project Benefit :**

**Individual Impact:**

**Chapter Impact:**

**Community Impact:**

1. **Appendices** (Attach your final financial statement and list of contacts. \*Optional: Attach other documentation as appropriate)
	1. Final Financial Statement
	2. Contacts

Final Financial Statement

**INCOME: PROPOSED ACTUAL**

**Appropriation from chapter** $0 $0

**Value of donated items (list)**

**Other sources of income (list)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TOTAL INCOME** $$

**EXPENSES: PROPOSED ACTUAL**

**Value of donated items (list)**

**Other expenses (list)**

**Return of appropriation from chapter** $0 $0

**Return to chapter (profit)** $0$0

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TOTAL EXPENSES** $$