Lean Event Project Charter

Processing Area: _____   Run Dates: _____

Champion: _____

Event Leaders: _____   Request Date: _____

BACKGROUND (Describe The Situation)

PROBLEM STATEMENT (Define the scope, what are you trying to solve)

OBJECTIVE S.M.A.R.T. Goals (Specific, Measureable, Attainable, Realistic, and Time Based)

IMPROVEMENT METRICS

	Item	Current	Target	% Change
1				
2				
3				
4				

TEAM MEMBERS and DEPARTMENTS

	Name	Department		Name	Department
1			8		
2			9		
3			10		
4			11		
5			12		
6			13		
7			14		

POTENTIAL ROADBLOCKS

LEAN EVENT APPROVALS

Vice President of Area: _____   Director of Area: _____
Date   Date

Director of Lean: _____   Superintendant / Manager of Area: _____
Date   Date

Routing: Superintendant --> Director --> VP --> Lean --> Post in Area Impacted

Lean Rev: 1/05/2011