

OBM Applied!

Proposed Project Application Form

Participant: _____

Organization: _____

Current Role in Organization: _____

Other Organization Representative Information:

Name: _____

Position: _____

Email: _____

Phone: _____

Proposed Project Name: (Ex: Improve quality of services, applying OBM to evaluate customer service, improving revenue through community engagement, decreasing employee turnover through improving training and development, etc.)

Type of Project: Check one.

Individual Group

Group members' names: _____

Project Description: (What is the project? Who will be involved? What are the measures of success?)

PLEASE NOTE: The project proposal phase of OBM Applied! is intended to give your instructor an idea of what you are thinking about doing, allowing your instructor to prepare to best assist you as your project progresses. This proposal is **not intended to result in the approval or rejection of projects**, but simply gives your instructor some background information. During the orientation and unit 1 of the course, your instructor will provide coaching on your proposed project, which may result in either validating what you initially proposed or further defining your organization's needs with your sponsor. Your participation in OBM Applied! starts with defining your project. Your proposal is the first step on this journey. **Welcome to OBM Applied!**