

Quality Services through Partnership  
**TEAM CHARTER**

**PROJECT MISSION:** (this may later be revised by the team)

**GUIDANCE TEAM (TEAM SPONSOR):** (the individual(s) who own the existing process and have the authority to approve changes)

**BACKGROUND:** (strategic importance, what has been happening, importance to the customer)

**BOUNDARIES:** (limits on scope of process change allowable as defined by the team sponsor - authority to pilot improvements and/or just recommend, legal restrictions, budget, etc.)

**WHAT THE TEAM HAS AUTHORITY TO DO:**

**ESTIMATED DATE FOR COMPLETION:**

**MEETING FREQUENCY & DURATION:**

To be set by the team

**MEMBERS:** (name, address, phone, fax, email)


**GUIDANCE TEAM LIAISON:**

**FACILITATOR:**

**TEAM LEADER:**

**TIMEKEEPER:**

**SCRIBE:**