



System Development and Life-Cycle Management (SDLCM) Methodology

SOLUTION ROLLOUT SUPPORT READY FOR DEPLOYMENT FORM	
Project Information	
Project or System Name:	Site:
Technical Project Manager:	Phone Number:
Rollout Support Readiness Checklist	
<p><i>Note: The purpose of this form is to act as a final checklist to ensure that all preparations have been made and that support is in place to begin deployment of the project or system to the site indicated in the Project Information block above. This readiness form is keyed to those activities identified in the Tactical Integration Plan, Section 2, Rollout Plan, Subsections 2.1 through 2.16.. It refers to those activities that must be completed or be ready to be completed at the host site, NOT to the activities required to prepare and test the software, system, or documentation at the development site.</i></p>	
<p>2.1 Have all key activities in the rollout elements and sequence section been completed, including site preparation? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.</p>	
<p>2.2 Have all preparations in the rollout schedule been completed? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.</p>	
<p>2.3 Has an operational readiness review been planned for? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.</p>	
<p>2.4 Have physical, functional, and documentation audits related to the deployment been planned for? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.</p>	
<p>2.5 Is a data conversion plan, including a backup and recovery plan, in place for the deployment? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.</p>	
<p>2.6 Is documentation ready to be turned over to the O&M management, maintainers, operators, help desk, system and data administrators, and users? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.</p>	
<p>2.7 Do all expected users have the required minimum hardware and software configurations? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.</p>	
<p>2.8 Have all personnel been cleared and physical security requirements met for deployment? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.</p>	
<p>2.9 Have all facility requirements been met, including any construction and equipment ordering? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.</p>	
<p>2.10 Is the training plan in place and ready to be executed to ensure proper training for all personnel following deployment? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.</p>	
SOLUTION ROLLOUT SUPPORT READY FOR DEPLOYMENT FORM (CONTINUED)	



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2.11 Have all production guides been developed for operators, maintainers, and users? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.	
2.12 Has a cutover technique and timing been identified? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.	
2.13 Are all aspects of on-site acceptance testing in place for execution? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.	
2.14 Has coordination with the owners of other systems, applications, or databases been completed? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.	
2.15 Have performance and customer satisfaction measurements and validation been identified? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.	
2.16 Has a schedule and provision been established for updating NRC Infrastructure Documentation? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list Problem Report Form numbers here.	
Additional Comments	
Enter any additional concerns about the readiness for deployment in this section.	
Deployment Readiness Certification	
Overall Project Manager:	Date: