System Development and Life-Cycle Management (SDLCM) Methodology

PERFORMANCE REPORT FORM		
Project Information		
Project/Task Name:		**Date of Request:**
Test Manager:		**Phone Number:**

Performance Criteria Measures

Did the system pass all performance criteria?
❏ Yes   ❏ No   If no, provide information below.

Performance Criteria Measures	Acceptable Range	Test Results	Problem Report Number

Acceptance Test Readiness

Is the system ready for acceptance testing? That is, have all critical issues been resolved?
❏ Yes   ❏ No   If no, explain strategy to resolve problems and approximate time frame here.

Approval to Proceed to Acceptance Test

Overall Project Manager:		**Date:**