

**STAFF AUGMENTATION REQUEST JUSTIFICATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Agency |       | NJSTART Number |       |
| ***NOTE:**** *The staff augmentation contract cannot be used for ongoing maintenance and support. Only project-related work may be performed.*
* *No new work will be authorized on extension requests.*
 |
| **The Following Information Must be Provided in Order for****This Request for Staff Augmentation to be Considered for Approval** |
| **A** | Indicate the type of request. |
|  | [ ]  New | [ ]  Extension\* |  |
|  | \*Provide the NJSTART Number(s) of the prior engagement(s): |
|  |  |       |  |       |  |       |
| **B** | Describe, in detail, the purpose of this request. |
|  |       |
| **C** | List the specific deliverables that will be produced by the resource as a result of this engagement. Include start and end dates. |
|  |       |
| **D** | List all major milestones of this project with their target dates. (Attach a project plan with milestones indicated.) |
|  |       |
| **E** | Explain why a state employee(s) cannot provide these services. |
|  |       |
|  |
| **The Following Questions Apply to Extensions\*\* Only** |
| *\*\*Extension Requests beyond 12 months:**For State Using Agencies, a request for an extension beyond 12 months must receive approval for the exception from the State Contract Manager (or SCM). Using Agencies must submit a detailed written justification to support an extension request.**For State Using Agencies, extensions to IT staff augmentation requests will be granted by the SCM on a case-by-case basis. An extension is for work not completed during the original engagement. An extension will be granted only when one or more of the parameters listed below are met and when the agency is planning to, or is currently working on implementation of a long-term alternative to staff augmentation. The extension parameters include, but are not limited to:*• Reviewing existing State staff to ensure none are available to perform these functions• Reviewing if there is an existing statewide contract that can be utilized• Creating a State position• Hiring someone to fill a position• Developing an RFP for the work• Decommissioning a system, thereby eliminating the need for the resource• Conducting knowledge transfer to existing staff• Expanding the scope of an existing contract via a change order in order to incorporate staff augmentation work. |
| **F** | Explain why this extension is necessary. |
|  |       |
| **G** | Provide the following information regarding the length of the engagement as it relates to this project. |
|  | Duration of the original engagement (in months):  |       |
|  | Duration of any previously approved extension (in months): |       |
|  | Duration of this extension (in months): |       |
| ***NOTE:****Per the Method of Operations for the M-4003 contract, as shown above. If the total engagement is more than 12 months, written approval from the State Contract Manager (SCM) is required and must be included with the package.* |
| **H** | List the items not completed in the original Request for which you are requesting an extension. (New work is not permitted – a new request is required.) |
|  |       |