



Lessons Learned

Project Name	
Project Manager	
Date of Issue	/ / 20

PMO Review	
Date	/ / 20
Notes	





Area	Lessons Learned about successful tasks	Lessons Learned about unsuccessful tasks	Recommendations about completed tasks	Recommendations about incompletd tasks
Scope				
Schedule				
Budget				
Quality				
Communication				
Risk Management				
Resources				
Stakeholders				
Other				

Project Manager Approval

Name:

Signature:

Date: / / 20