

Event No.:

Date Created:

Rev. No.:

Event Priority (H,M,L):

# Kaizen Event Charter

**TITLE:**

## Team Members

Name	Department	Contact Info.	Role	Name	Contact Info.

## Main Stakeholders

Kaizen leader:

Sponsor:

Process owner:

## Scope

Process name:	
Process mapped?	
Start point:	
End point:	
Area / Line:	
Boundaries:	
Impacted KPIs:	

## Schedule

Duration in days(2-5):	
Start date:	
End date:	
Hours each day:	
Daily start time:	
Report date:	
Meetings location:	

## Problem Summary (Reason for Kaizen Event)

## Voice of the Customer (VOC)

## Problem Category

Quality  
  Cost  
  Delivery  
  Efficiency  
  Waste  
 Safety  
  Energy  
  Moral  
 Other: \_\_\_\_\_

## Measurable Objective (Aligned with the Mission or a strategic goals)

## Metrics (Quality, cost, delivery, safety, satisfaction, etc.)

Metric	Current	Goal

## Resources needed (Materials, equipment, human, financial, training, etc.)

Title	Date needed

## Possible Obstacles (Budget constraints, unavailable resources, etc.)

## Key Deliverables (In order of importance)

## Daily Milestones

Day 1:	
Day 2:	
Day 3:	
Day 4:	
Day 5:	

## Signatures (The signatures of the people below document approval of the Kaizen Event Charter)

	Signature	Date
Kaizen Leader:		
Sponsor:		
Process Owner:		

The Kaizen Leader is empowered by this Kaizen Event Charter to proceed with the event as outlined above