



CCDMD PROJECT PRESENTATION

Form

Please submit this form in its original (PDF) format. Do not print it and then submit a scanned version. Furthermore, please do not restrict access to the content once it is filled.

See Appendix 1 of the Call for Projects guide for a list of documents to include with your application and Appendix 3 for the list of criteria. Use the tab key to advance through the information fields.

GENERAL INFORMATION

Project

Type of materials to be developed:
Project title:

New materials

or

Translation into English

Title of materials to be translated:
Author of materials to be translated:
Publisher or designer:

or

Updates to an existing resource

Title of materials to be updated:
Author of materials to be updated:
Type of update:



1. APPLICANT INFORMATION

Applicant

CEGEP teacher

or

Discipline specialist

Mr. / Ms.:	First name:	Last name:
Teaching discipline:		
Address:		
Telephone:	Email:	

College

CEGEP name:

Academic dean (or equivalent)

Mr. / Ms.:	First name:	Last name:
Title:	Email:	

Co-applicant, if applicable

CEGEP teacher

or

Discipline specialist

Mr. / Ms.:	First name:	Last name:
Teaching discipline:		
Address:		
Telephone	Email:	

CEGEP

CEGEP name:

Academic dean (or equivalent)

Mr. / Ms.:	First name:	Last name:
Title:	Email:	



Project summary

Maximum 10 lines.

2. TARGET CLIENT GROUP

Program of study

Program of study (number and name):

Competencies or elements of competency

Competency or element of competency (number and name):



List of other CEGEPs that offer the program

List of CEGEPs (Except for General Education courses or if the project has an impact on educational success. Specify if this is the case.):

Target CEGEP student group

User profile of these materials:

Context of use of these materials:

Number of students enrolled in each related course (or with similar needs) in the entire network:

Other potential clients:



3. RELEVANCE OF NEEDS

Issue

Describe the educational or media-related needs that motivated the project.

Justification of project in relation to existing materials

The project proposal reveals major gaps or shortcomings in the teaching and learning of the subject matter in question. /

The needs identified stem from these gaps or problems. /

The file includes a complete inventory of existing materials. /

The criticism associated with the existing resources is justified in light of the observed needs.



4. EDUCATIONAL QUALITY

Pedagogical objectives of the project

List the objectives stemming from needs stated in Section 3.

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Content components

List of attachments to the file.

For a textbook

Detailed table of contents – Name of attached file:
Sample chapter – Name of attached file:
Summary for each of the other chapters – Name of attached file:
If applicable, a sample teaching document already produced by the teacher – Name of attached file:

For digital material

Presentation of main components in the form of a plan or chart (facts, concepts, theories, methods) – Name of attached file:
Brief description of functional components (drill and practice software, situation-simulation exercises, video sequences, etc.) – Name of attached file:



Educational approach

Indicate the main teaching methods or activities to be included.

5. RELEVANCE OF MEDIA

Provide a rationale for the project's media specifications



6. FEASIBILITY OF THE PROJECT (from the CCDMD's perspective)

Production conditions

Describe and specify the extent of the work involved:

1) Number of pages of text:

2) Number of photos, tables, figures or drawings, animation or video sequences (their duration), etc.:

3) Required resource materials:

4) Travel involved:

5) Preliminary work already completed, including research, analysis, writing, testing, etc.:



Estimated duration of the project

Estimate the production or writing time; specify periods of availability throughout the year:

Copyright

List the copyrighted works that may be used in the project:



7. SUPPORT FOR THE PROJECT

List the people whose duly signed letters of support are included

From appropriate program coordinators / department chairs / academic deans (or equivalent in the CEGEP network, the academic dean of the applicant's college (or equivalent) or any other organization whose opinion is relevant for the project.

First and last name:	Title:
CEGEP or organization name:	Email:
Name of attached file:	

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CEGEP or organization name:	Email:
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First and last name:	Title:
CEGEP or organization name:	Email:
Name of attached file:	

<p>Other letters of support: (First and last name, Title, CEGEP or organization name, Email, Name of attached file)</p>
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SIGNATURES

Add electronic signatures in the appropriate fields.

Please note: Once a first signature has been applied and the document saved, the entire form cannot be modified.

Applicant

Mr. / Ms.:	First name:	Last name:
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Signature

Date:

Co-applicant, if applicable

Mr. / Ms.:	First name:	Last name:
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Signature

Date:

Academic dean (or equivalent)

By signing the project presentation form, the academic dean (or equivalent) of the CEGEP acknowledges the project's importance.

Mr. / Ms.:	First name:	Last name:
Title:		

Signature

Date:
