



### CCDMD PROJECT PRESENTATION

Please submit this form in its original (PDF) format. Do not print it and then submit a scanned version. 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**

| Т  | Type of materials to be developed:    |  |  |  |  |  |
|----|---------------------------------------|--|--|--|--|--|
| Р  | 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  | •               |    |       |            |  |  |  |  |
|                     |                 |    |       |            |  |  |  |  |
| Mr. / Ms.:          | First name:     |    |       | Last name: |  |  |  |  |
| Teaching discipline | »:              |    |       |            |  |  |  |  |
| Address:            |                 |    |       |            |  |  |  |  |
| Telephone:          |                 | En | nail: |            |  |  |  |  |
| College             |                 |    |       |            |  |  |  |  |
| CEGEP name:         |                 |    |       |            |  |  |  |  |
| Academic dean       | (or equivalent) |    |       |            |  |  |  |  |
| Mr. / Ms.:          | First name:     |    |       | Last name: |  |  |  |  |
| Title:              |                 | En | nail: |            |  |  |  |  |
| Co-applicant, if ap | plicable        | ·  |       |            |  |  |  |  |
| ☐ CEGEP teacher     |                 |    |       |            |  |  |  |  |
| or  Discipline spec | ialiet          |    |       |            |  |  |  |  |
| Mr. / Ms.:          | First name:     |    |       | Last name: |  |  |  |  |
| Teaching discipline | ):<br>:         |    |       |            |  |  |  |  |
| Address:            |                 |    |       |            |  |  |  |  |
| Telephone           |                 | En | nail: |            |  |  |  |  |
| CEGEP               |                 |    |       |            |  |  |  |  |
| CEGEP name:         |                 |    |       |            |  |  |  |  |
| Academic dean       | (or equivalent) |    |       |            |  |  |  |  |
| Mr. / Ms.:          | First name:     |    |       | Last name: |  |  |  |  |
| Title:              | ·               | En | nail: |            |  |  |  |  |





| Pro | eject summary  |
|-----|--|
|     | Maximum 10 lines.                                      |
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|     |  |
|     | TARGET CLIENT GROUP                                    |
| 2.  | TARGET CLIENT GROUP                                    |
| Pro | ogram of study   |
|     | Program of study (number and name):                    |
|     |  |
|     |  |
| _   |  |
| Co  | mpetencies or elements of competency                   |
|     | Competency or element of competency (number and name): |
|     |  |
|     |  |





## List of other CEGEPs that offer the program

| List of CEGEPs case.): | (Except for General Education courses or if the project has an impact on educational success. Specify if this | s is |
|------------------------|---|------|
|                        |   |      |
|                        |   |      |
|                        |   |      |
|                        |   |      |
|                        |   |      |
|                        |   |      |
| jet CEGEP st           | tudent group  |      |
| User profile of th     | ese materials:  |      |
|                        |   |      |
|                        |   |      |
|                        |   |      |
|                        |   |      |
| Context of use of      | f these materials:  |      |
|                        |   |      |
|                        |   |      |
|                        |   |      |
| Number of stude        | ents enrolled in each related course (or with similar needs) in the entire network:                           |      |
|                        |   |      |
|                        |   |      |
|                        |   |      |
|                        |   |      |
| Other potential of     | lients:   |      |
|                        |   |      |
|                        |   |      |
|                        |   |      |
|                        |   |      |



## 3. RELEVANCE OF NEEDS

| ue                     |   |  |
|------------------------|---|--|
| Describe the education | nal or media-related needs that motivated the project.  |  |
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|                        |   |  |
| ification of pro       | ect in relation to existing materials   |  |
|                        | eveals major gaps or shortcomings in the teaching and learning of the subject matter in question. / |  |
|                        | tem from these gaps or problems./   |  |
|                        | nplete inventory of existing materials. /   |  |
| he criticism associat  | ed with the existing resources is justified in light of the observed needs.                         |  |
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## 4. EDUCATIONAL QUALITY

| _    | pgical objectives of the project he objectives stemming from needs stated in Section 3.  |
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|      |  |
|      | nt components  |
| List | of attachments to the file.  |
| ☐ F  | 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:   |
| F    | 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: |



## 2024-2025 Call for projects

| ducational     | approach         |                   |                  |             |  |  |
|----------------|------------------|-------------------|------------------|-------------|--|--|
| Indicate the n | nain teaching me | thods or activiti | ies to be includ | ed.         |  |  |
|                |                  |                   |                  |             |  |  |
|                |                  |                   |                  |             |  |  |
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| DEI EVA        | NCE OE A         | 4EDIA             |                  |             |  |  |
|                | NCE OF M         |                   |                  |             |  |  |
|                | NCE OF M         |                   | media spec       | ifications  |  |  |
|                |                  |                   | media spec       | difications |  |  |
|                |                  |                   | media spec       | cifications |  |  |
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|                |                  |                   | media spec       | cifications |  |  |
|                |                  |                   | media spec       | cifications |  |  |



## **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:  |
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|  |
| 4) Travel involved:  |
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| 5) Preliminary work already completed, including research, analysis, writing, testing, etc.:           |
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## Estimated duration of the project

| yright                     |                     |                      |  |  |
|----------------------------|---------------------|----------------------|--|--|
|                            | d works that may be | used in the project: |  |  |
|                            | d works that may be | used in the project: |  |  |
|                            | d works that may be | used in the project: |  |  |
| yright List the copyrighte | d 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:      |        |  |  |  |  |
|                             |        |  |  |  |  |
| First and last name:        | Title: |  |  |  |  |
| CEGEP or organization name: | Email: |  |  |  |  |
| Name of attached file:      |        |  |  |  |  |
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| First and last name:        | Title: |  |  |  |  |
| CEGEP or organization name: | Email: |  |  |  |  |
| Name of attached file:      |        |  |  |  |  |
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| First and last name:        | Title: |  |  |  |  |
| CEGEP or organization name: | Email: |  |  |  |  |
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| First and last name:        | Title: |  |  |  |  |
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| CEGEP or organization name: | Email: |  |  |  |  |
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| First and last name:        | Title: |  |  |  |  |
| CEGEP or organization name: | Email: |  |  |  |  |
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# CENTRE COLLÉGIAL DE DÉVELOPPEMENT DE MATÉRIEL DIDACTIQUE

## 2024-2025 Call for projects

| First and last name:   | Title: |  |  |  |  |
|--|--------|--|--|--|--|
| CEGEP or organization name:  | Email: |  |  |  |  |
| Name of attached file:   |        |  |  |  |  |
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| First and last name:   | Title: |  |  |  |  |
| CEGEP or organization name:  | Email: |  |  |  |  |
| Name of attached file:   |        |  |  |  |  |
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| First and last name:   | Title: |  |  |  |  |
| CEGEP or organization name:  | Email: |  |  |  |  |
| Name of attached file:   |        |  |  |  |  |
|  |        |  |  |  |  |
| First and last name:   | Title: |  |  |  |  |
| CEGEP or organization name:  | Email: |  |  |  |  |
| Name of attached file:   |        |  |  |  |  |
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| First and last name:   | Title: |  |  |  |  |
| CEGEP or organization name:  | Email: |  |  |  |  |
| Name of attached file:   |        |  |  |  |  |
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| First and last name:   | Title: |  |  |  |  |
| CEGEP or organization name:  | Email: |  |  |  |  |
| Name of attached file:   |        |  |  |  |  |
|  |        |  |  |  |  |
| First and last name:   | Title: |  |  |  |  |
| CEGEP or organization name:  | Email: |  |  |  |  |
| Name of attached file:   |        |  |  |  |  |
|  |        |  |  |  |  |
| Other letters of support:  |        |  |  |  |  |
| (First and last name, Title, CEGEP or organization name, Email, Name of attached file) |        |  |  |  |  |
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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:  |
| Signature   |             |   |
| Date:   |             |   |
| Co-applicant, if ap                                     | plicable    |   |
| Mr. / Ms.:  | First name: | Last name:  |
| Signature   |             |   |
| Date:   |             |   |
| Academic dean (or<br>By signing the pro-<br>importance. |             | emic dean (or equivalent) of the CEGEP acknowledges the project's |
| Mr. / Ms.:  | First name: | Last name:  |
| Title:  |             |   |
| Signature   |             |   |
| Date:   |             |   |